


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jan 11, 2007 08:00 AM
Secretary of State**

DOCUMENT # 720038 1. Entity Name CHRISTIAN ACTIVITIES, INC.	
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Principal Place of Business 6045 PARK BLVD PINELLAS PARK, FL 33780	Mailing Address P.O. BOX 222 PINELLAS PARK, FL 33780
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DO NOT WRITE IN THIS SPACE



01082007 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-1378320	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent DUNCAN, GLENN 4403 80TH ST. NO. ST. PETERSBURG, FL 33709

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IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT ALKINS, PRISCILLA 3219 LELLA AVENUE TAMPA, FL 33611
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GRIFFIS, JOHN SR. 1015 E HEMOSA AVENUE BARTOW, FL 33830
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SCHLEMMANN, CANOLYN 5982 106 TERRACE NORTH PINELLAS PARK, FL 33782
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DUNCAN, GLENN 4403 80TH STREET N. ST. PETERSBURG, FL 33709
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PERRY, ROBERT 2584 46TH TERRACE NORTH ST PETERSBURG, FL 33714
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000582852
01/11/07-80049-007 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Robert Perry - Treasurer* Jan. 8-07 727-527-9684
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #