2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#734193

FILED Jan 13, 2009 Secretary of State

Entity Name: INSTITUTE FOR CHRISTIAN STUDIES, INC.

Current Principal Place of Business: New Principal Place of Business: 1017 E. ROBINSON STREET ORLANDO, FL 32801 **Current Mailing Address: New Mailing Address:** 1017 E. ROBINSON STREET ORLANDO, FL 32801 FEI Number: 59-1611206 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BRONDSTED, LINDA REV. 1017 EAST RÓBINSON ST ORLANDO, FL 32801 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. SIGNATURE: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete BURKS, ROBERT Name: Name: 1672 WINDY BLUFF RD Address: Address: City-St-Zip: LONGWOOD, FL 32750 City-St-Zip: Title: () Delete Title: () Change () Addition KURTZ, JAMES E REV Name: Name: Address: 660 NW LAKEVIEW DR. Address: City-St-Zip: SEBRING, FL 33875 City-St-Zip: Title: VD. () Delete Title: (X) Change () Addition CUNDIFF, EDWARD Name: WEISS, EDWARD REV. Name: Address: 14 GLENDALE DR. Address: 1435 SE 21ST STREET City-St-Zip: KISSIMMEE, FL 34744 City-St-Zip: OKEECHOBEE, FL 34974 Title: () Delete Title: (X) Change () Addition Name: KLINE, REV. NANCY Name: KLINE, NANCY REV. 442 W MINNESOTA AVE 442 W MINNESOTA AVE Address: Address: City-St-Zip: DELAND, FL 32720 City-St-Zip: DELAND, FL 32720 Title: () Delete Title: (X) Change () Addition HAMILTON, REV. ROGER HAMILTON, ROGER REV. Name: Name: 2499 N WEST MORELAND DR 2499 N WESTMORELAND DR Address: Address: City-St-Zip: ORLANDO, FL 32804 City-St-Zip: ORLANDO, FL 32804 Title: () Delete Title: (X) Change () Addition ALDAY, TOM ALDAY, TOM MR. Name: Name: Address: 651 EAST LAKES SUE AVE Address: 651 EAST LAKE SUE AVE WINTER PARK, FL 32789 WINTER PARK, FL 32789 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LINDA J. BRONDSTED DEAN 01/13/2009