

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
May 13, 2006
Secretary of State

DOCUMENT# 740392

Entity Name: CAMPUS HOUSE OF CHRISTIAN CAMPUS MINISTRY, INC.**Current Principal Place of Business:**PO BOX 13435
GAINESVILLE, FL 32604 US**New Principal Place of Business:****Current Mailing Address:**PO BOX 13435
GAINESVILLE, FL 32604 US**New Mailing Address:****FEI Number:** 59-1780058 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**CELESTE, GAILEY E PRD
1707 N.E. 40TH PLACE
GAINESVILLE, FL 32609 US**Name and Address of New Registered Agent:**

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:**Title:** CM () Delete
Name: GAILEY, ROBERT
Address: 1707 N.E. 40TH PLACE
City-St-Zip: GAINESVILLE, FL 32609**Title:** D () Delete
Name: THOMAS, BILL
Address: 950 S.W. 2ND STREET
City-St-Zip: LAKE BUTLER, FL 32054**Title:** D () Delete
Name: DESHONG, RANDY
Address: 11907 N.E. CR 237
City-St-Zip: LAKE BUTLER, FL 32054**Title:** () Delete
Name:
Address:
City-St-Zip:**Title:** () Delete
Name:
Address:
City-St-Zip:**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** DP (X) Change () Addition
Name: THOMAS, BILL
Address: 950 S.W. 2ND STREET
City-St-Zip: LAKE BUTLER, FL 32054**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** D () Change (X) Addition
Name: SMITH, FRED
Address: 5495 WEST PAWNEE DRIVE
City-St-Zip: BEVERLY HILLS, FL 34465**Title:** D () Change (X) Addition
Name: MILLER, BRAD
Address: 3297 JORDON WAY
City-St-Zip: VALDOSTA, GA 31605**Title:** D () Change (X) Addition
Name: JACOB, TRAVIS
Address: 14043 OSPREY LINKS RD # 392
City-St-Zip: ORLANDO, FL 32837

I hereby certify that the information supplied with this filing does not qualify for the 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: CELESTE E. GAILEY

PRD

05/13/2006

Electronic Signature of Signing Officer or Director

Date