

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 740638

FILED
Mar 24, 2009
Secretary of State

Entity Name: ASSOCIATED CHRISTIAN TELEVISION SYSTEM, INC

Current Principal Place of Business:

123 E CENTRAL PKWY
ALTAMONTE SPRINGS, FL 32701 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 608040
ORLANDO, FL 32860 US

New Mailing Address:

123 E CENTRAL PKWY
ALTAMONTE SPRINGS, FL 32701 US

FEI Number: 59-1798262

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOWERS, CLAUD W
285 W CENTRAL PKWY
SUITE 1716
ALTAMONTE SPRINGS, FL 32714 US

Name and Address of New Registered Agent:

BOWERS, CLAUD W
123 E CENTRAL PKWY
ALTAMONTE SPRINGS, FL 32701 US

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: CLAUD BOWERS

03/24/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CPD () Delete
Name: BOWERS, CLAUD W
Address: 285 WEST CENTRAL PKWY, STE 1716
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: VST () Delete
Name: BOWERS, FREEDA M
Address: 285 WEST CENTRAL PKWY, STE 1716
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: STD () Delete
Name: BEIK, STEPHEN
Address: 285 WEST CENTRAL PKWY, STE 1716
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: D () Delete
Name: SPURR, THURLOW
Address: 285 WEST CENTRAL PKWY, STE 1716
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CPD (X) Change () Addition
Name: BOWERS, CLAUD W
Address: 123 E CENTRAL PKWY
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: ST (X) Change () Addition
Name: BOWERS, FREEDA M
Address: 123 E CENTRAL PKWY
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: VP (X) Change () Addition
Name: BEIK, STEPHEN
Address: 123 E CENTRAL PKWY
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: D (X) Change () Addition
Name: SPURR, THURLOW
Address: 123 E CENTRAL PKWY
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

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: CLAUD W. BOWERS

CPD

03/24/2009

Electronic Signature of Signing Officer or Director

Date