

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753236

FILED  
Apr 20, 2009  
Secretary of State

**Entity Name:** CHRISTIAN FINANCIAL RESOURCES, INC.

**Current Principal Place of Business:**

773 STIRLING CENTER PL  
LAKE MARY, FL 32746

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 951719  
LAKE MARY, FL 32795

**New Mailing Address:**

**FEI Number:** 59-2037205

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KEY, DARREN R.  
1185 CYPRESS LOFT PLACE  
LAKE MARY, FL 32746 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: D ( ) Delete  
Name: GEARHART, MICHAEL  
Address: 5253 W. DEPUTY DRIVE  
City-St-Zip: BEVERLY HILLS, FL 34465

Title: S ( ) Delete  
Name: MALDONADO, JOSE M  
Address: 109 CALABRIA SPRINGS COVE  
City-St-Zip: SANFORD, FL 32771

Title: CEO ( ) Delete  
Name: KEY, DARREN R  
Address: 1185 CYPRESS LOFT PLACE  
City-St-Zip: LAKE MARY, FL 32746

Title: D ( ) Delete  
Name: PERCIVAL, STAN  
Address: 7010 32ND AVENUE N.  
City-St-Zip: SAINT PETERSBURG, FL 33710

Title: D ( ) Delete  
Name: MCSPADDEN, DEAN  
Address: 4614 GILRONAN COURT  
City-St-Zip: PALM HARBOR, FL 34685

Title: V ( ) Delete  
Name: KOCOLOWSKI, MIKE  
Address: 3690 ROCHELLE LANE  
City-St-Zip: APOPKA, FL 32712

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: JONES, GARY  
Address: 4218 S.E. 3RD AVE.  
City-St-Zip: CAPE CORAL, FL 33904

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: DARREN R. KEY

CEO

04/20/2009

Electronic Signature of Signing Officer or Director

Date