FILE NOW: FILING FEE IS \$61.25

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STAT Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

836068

(7)

FILED Jan 29 1998 8:00am Secretary of State

CHRISTIAN RECORD SERVICES, INC.							
Principal Plac	ce of Business	Mailing Address	Mailing Address			- **	
4444 S. 52ND LINCOLN NE 6		PO BOX 6097 LINCOLN NE 68506 US	LINCOLN NE 68506			3. Date Incorporated or Qualified 03/31/1976 4. FEI Number Applied For Not Applicable	
2. Principal F	Place of Business	2a. Mailing Address 26	26			5. Certificate of Status Desired \$8.75 Additional Fee Required	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	27			6. Election Campaign Financing Trust Fund Contribution Added to Fees	
City & Slate		City & State	City & State			7. Is this nonprofit corporation a homeowners association?	
Zìp	Country	Zip	├ ──	Country		8. This corporation owes or has paid the current year Intangible	
24	25 9. Name and Address of Curre	29 29 Agent	30	30		Personal Property Tax due June 30. Yes No WA	
	S. Hamo and Hamour S. World	nic riogiotorea rigoni		81	Name	10, Italia and Addieso of Nor Hogistered Agent	
EDGECOMBE, LARRY				82	Street Addre	ddress (P.O. Box Number is Not Acceptable)	
536 PROVIDENCE BLVD. DELTONA FL 32725							
DELIGNA PL 32725					City	log Zie Cede	
				84	•	FL 85 Zip Code	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.							
agent. I am ramitar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE							
SIGNATURE ,	Signature, typed or printed name of registered as	gent and title it applicable. (i	NOTE: Registere	d Ager	nt signature require	d when reinstating) DATE	
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	101		1,1 TI	TLE		Change Addition	
NAME	SANDEFUR, CHUCK		1.2 NAME				
STREET ADDRESS	8550 PIONEERS BLVD.			TREET A	ADDRESS		
CITY-ST-ZiP	LINCOLN NE			TY-ST	Γ-ZIP		
TITLE	TC	☐ DELETE	2.1 Ti			Change Addition	
NAME	RANZOLIN, L S	•		AME			
STREET ADDRESS	CHARD CORNER AND				ADDRESS		
CITY-ST-ZIP TITLE	DP			ITY-S	T-ZIP	Change Addition	
NAME	PITCHER, LAWRENCE J		3.1 TT 3.2 N/			Change Addition	
STREET ADDRESS	4444 S. 52ND ST.		1	-	ADDRESS		
CITY-ST-ZIP	LINCOLN NE		1				
TITLE	TD	DELETE	3.4. C	ITY-SI	1-ZIP	Change Addition	
NAME	APPENZELLER, R E	,	4. 2 N			Onungo Natiliti	
STREET ADDRESS	15425 AYLESBURG ST.			_	ADDRESS		
CITY-ST-ZIP	SILVER SPRING MD			4.4 CITY-ST-ZIP			
TITLE	DT	☐ DELETE		5.1 TITLE		☐ Change ☐ Addition	
NAME	HAWKINS, L V			5.2 NAME		· -	
STREET ADDRESS	4444 S. 52ND ST.			5.3 STREET ADDRESS			
CITY-ST-ZIP	LINCOLN NE			5.4 CITY-ST-ZIP			
TITLE	DS	DELETE		6.1 TITLE		☐ Change ☐ Addition	
NAME	GILBERT, COLLEEN		6.2 NA	ME			
STREET ADDRESS			REET A	ADDRESS			
CITY-ST-ZIP	LINCOLN NE		6.4 CI	TY-ST	-ZIP		
14. I hereby o	ertify that the information supplied v	vith this filing does not qualify				ection 119.07(3)(i), Florida Statutes. I further certify that the information	

indicated on this annual report or supplied with this ning does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental annual 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 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE:

Say Could REQUIRED