


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 08:00 AM
Secretary of State

DOCUMENT # 836068 1. Entry Name CHRISTIAN RECORD SERVICES, INC.	
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Principal Place of Business 4444 S. 52ND ST. LINCOLN, NE 68516	Mailing Address PO BOX 6097 LINCOLN, NE 68506 US
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DO NOT WRITE IN THIS SPACE



04282005 No Chg-NP CR2E037 (10/03)

4. FEI Number 47-0405439	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent EDGEcombe, LARRY 1030 ALAHAMBRA STREET DELTONA, FL 32725

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCT CARLSON, DENNIS 8307 PINE LAKE RD. LINCOLN, NE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TC RANZOLIN, L S 6 AYLESBURY CT. SILVER SPRING, MD
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP PITCHER, LAWRENCE J 4444 S. 52ND ST. LINCOLN, NE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BURTON, S.A. 5801 PRESCOTT PLACE SILVER SPRING, MD
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT BULLOCK, DWAYNE 4444 S 52ND LINCOLN, NE 685161302
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS GILBERT, COLLEEN 4444 S. 52ND ST. LINCOLN, NE

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Colleen D Gilbert Colleen D Gilbert 4/28/2005 402-488-0981
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #