

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 836068

FILED
Apr 22, 2009
Secretary of State

Entity Name: CHRISTIAN RECORD SERVICES, INC.

Current Principal Place of Business:

4444 S. 52ND ST.
LINCOLN, NE 68516 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 6097
LINCOLN, NE 68506 US

New Mailing Address:

FEI Number: 47-0405439

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EDGECOMBE, LARRY
2831 IDLEWEISE DR
DELTONA, FL 32738 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: VCT () Delete
Name: CARLSON, DENNIS
Address: 8307 PINE LAKE RD.
City-St-Zip: LINCOLN, NE 68516 US

Title: TC () Delete
Name: WILSON, TED N
Address: 12501 OLD COLUMBIA PIKE
City-St-Zip: SILVER SPRING, MD 20904 US

Title: DP () Delete
Name: PITCHER, LAWRENCE J
Address: 4444 S. 52ND ST.
City-St-Zip: LINCOLN, NE 68516 US

Title: TD () Delete
Name: BURTON, SHIRLEY A
Address: 5801 PRESCOTT PLACE
City-St-Zip: LINCOLN, NE 68506 US

Title: DT () Delete
Name: BULLOCK, DWAYNE
Address: 4444 S 52ND
City-St-Zip: LINCOLN, NE 685161302 US

Title: DS () Delete
Name: RUSSELL, JOY
Address: 4444 S 52ND
City-St-Zip: LINCOLN, NE 68516 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VCT (X) Change () Addition
Name: HOWARD, ROSCOE
Address: 8307 PINE LAKE RD.
City-St-Zip: LINCOLN, NE 68516 US

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: DT (X) Change () Addition
Name: ORIAN, MATTHEW
Address: 4444 S 52ND
City-St-Zip: LINCOLN, NE 685161302 US

Title: DS (X) Change () Addition
Name: ORIAN, MATTHEW
Address: 4444 S 52ND
City-St-Zip: LINCOLN, NE 68516 US

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: MATTHEW ORIAN

DT

04/22/2009

Electronic Signature of Signing Officer or Director

Date