

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 28, 2007
Secretary of State**

DOCUMENT# 837697

Entity Name: REGGIE KILLOUGH'S CHRIST TEAM, INC.

Current Principal Place of Business:

1276 8TH ST
DAYTONA BEACH, FL 32117 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 265010
DAYTONA BEACH, FL 321265010 US

New Mailing Address:

FEI Number: 56-0990367 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KILLOUGH, REGINALD A REV.
89 S. ATLANTIC BLVD.
#1402
ORMOND BEACH, FL 32176 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: PD () Delete
Name: KILLOUGH, REGINALD A REV.
Address: 89 S. ATLANTIC BLVD. #1402
City-St-Zip: ORMOND BEACH, FL 32176

Title: VPD () Delete
Name: RANEW, DAVID
Address: 320 JEFFERSON ST.
City-St-Zip: PORT ORANGE, FL

Title: D () Delete
Name: KILLOUGH, SHIRLEY
Address: 89 S. ATLANTIC BLVD. #1402
City-St-Zip: ORMOND BEACH, FL 32176

Title: SECD () Delete
Name: HENCKEN, KEVIN
Address: 1115 CARMEN AVE.
City-St-Zip: DAYTONA BEACH, FL 32117

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: REGINALD KILLOUGH

PD

04/28/2007

Electronic Signature of Signing Officer or Director

Date