2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 847194

FILED Jan 07, 2004 Secretary of State

Entity Name: CHRIST GOSPEL CHURCHES INTERNATIONAL, INC.

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
	786 AKWOOD DRIVI DNVILLE, IN 471					
Current Mailing Address:			New Maili	New Mailing Address:		
	786 AKWOOD DRIVI DNVILLE, IN 471					
FEI Number:	35-1039028	FEI Number Applied For () FEI	Number Not Appl	olicable () Certificate of Status Desired ()		
Name and	Address of Cui	rrent Registered Agent:	Name and	d Address of New Registered Agent:		
	DBERT ST. NORTH PARK, FL 3378	2 US				
The above in the State		omits this statement for the purpos	e of changing i	its registered office or registered agent, or both,		
SIGNATUR						
	Electronic	Signature of Registered Agent		Date		
OFFICERS AND DIRECTORS:		ADDITION	NS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	T () De LANGLEY, COLIN 1014 MAYFAIR AV CLARKSVILLE, TN	/E	Title: Name: Address: City-St-Zip:	TD (X) Change () Addition LANGLEY, COLIN 1014 MAYFAIR AVE CLARKSVILLE, TN		
Title: Name: Address: City-St-Zip:	PD () De HICKS, REV B R, 714 E. MAIN ST. NEW ALBANY, IN	elete	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	SD () De CHRISTY, REV JA 216 LONGVIEW D JEFFERSONVILLE	MES, PR	Title: Name: Address: City-St-Zip:	()Change()Addition		
Title: Name: Address: City-St-Zip:	() De	elete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition STILES, RICHARD REV 505 AMELIE DR JEFFERSONVILLE, IN 47130		
Title: Name: Address: City-St-Zip:	() De	elete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition GODBOLT, JOHN DR 591 AMBROSE PLACE FAYETTEVILLE, NC 28314		
Title: Name: Address: City-St-Zip:	() De	elete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition CARTER, TIL REV 4414 TUNNEL MILL ROAD CHARLESTOWN, IN 47111		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: REV COLIN LANGLEY T 01/07/2004