## 2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# F06000003662

**FILED** Nov 23, 2009 Secretary of State

Entity Name: CHRISTOPHER MANAGEMENT INC. **Current Principal Place of Business: New Principal Place of Business:** 63 S 300 E SUITE 100 ST. GEORGE, UT 84770 **Current Mailing Address: New Mailing Address:** 63 S 300 E SUITE 100 ST. GEORGE, UT 84770 FEI Number: 20-4187636 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BELL, CAROLE A 750 N ATLANTIC AVENUE **APT 1406** COCOA BEACH, FL 32931 US 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:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete

OREN, PAUL E Name:

750 N ATLANTIC AVENUE #1406 Address: City-St-Zip: COCOA BEACH, FL 32931

Title:

() Delete Name:

Address: City-St-Zip:

(X) Change ( ) Addition Title:

OREN, CRAIG D Name:

1782 TAYLORS CREEK RD Address:

City-St-Zip: WEEMS, VA 22576

Title: ( ) Change (X) Addition

Name: OREN. KATHRYN

Address: 750 N. ATLANTIC AVE #1406 COCOA BEACH, FL 32931 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CRAIG D OREN DP 11/23/2009