2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L03000008332

1. Entity Name

CHRISTIAN MEDIA INTERNATIONAL, LLC



FILED Sep 01, 2006 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

5000 EGGLESTON AVENUE ORLANDO, FL 32804 5000 EGGLESTON AVENUE ORLANDO, FL 32804



07182006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 56-2384834 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

TURNEY, R.B. 5000 EGGLESTON AVENUE ORLANDO, FL 32804

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	named entity submits this statement for the purpose of cha tions of registered agent.	anging its registered office or registered agent, or bot	n, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered against and tide if applicable.	(NOTE: Registered Agent signishine required when reinstating)	DATE
Fii Due 1	ling Fee is \$50.00 by September 6, 2006		
9.	MANAGING MEMBERS/MANAGERS		
TITLE	MGR	•	
NAME	TURNEY, R.B.		
STREET ADDRESS	109 SATSUMA DR	l l	
CITY-ST-ZIP	ALTAMONTE SPRINGS, FL 32714		
TITLE	MGR		HAAAAAA
NAME	WORK, JANET G		000000575908 09/01/06-80007-004 55:00
STREET ADDRESS	2521 THICKET RIDGE CT		

CITY-ST-ZIP LONGWOOD, FL 32779

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NAME
STREET ADDRESS

CITY-SI-ZIP

TITLE
NAME
STREET ADDRESS
CITY-SI-ZIP

TITLE
NAME
STREET ADDRESS

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11. I hereby certify that the information supplied with this fifting does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

HALL OW JANET G. WORK

18 July 06

407.290.0121

Daytime Phone #