

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005072

FILED
Apr 29, 2006
Secretary of State

Entity Name: CHRISTIAN RESTORATION MINISTRIES, INC.

Current Principal Place of Business:

9800 TOUCHTON RD
234
JACKSONVILLE, FL 32246

New Principal Place of Business:

Current Mailing Address:

9800 TOUCHTON RD
234
JACKSONVILLE, FL 32246

New Mailing Address:

FEI Number: 59-3662028 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MATHIS, ABBIE
9800 TOUCHTON ROAD
234
JACKSONVILLE, FL 32246 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: D () Delete
Name: MATHIS, ABBIE
Address: 9800 TOUCHTON RD APT 234
City-St-Zip: JACKSONVILLE, FL 32207 US

Title: O/D () Delete
Name: BROWN, SANDRA
Address: 2344 BURGOYNE DR
City-St-Zip: JACKSONVILLE, FL 32208 US

Title: D () Delete
Name: GALLOWAY, BETTY
Address: 682 PINE HARBOR RD.
City-St-Zip: PELL CITY, AL 35128 US

Title: D () Delete
Name: MANNING, RONALD REV
Address: 2171 WEATHERLY AVE.
City-St-Zip: WEST MELBOURNE, FL 32904 US

Title: D () Delete
Name: WAIT III, PETE REV.
Address: 962 OCEAN BLVD
City-St-Zip: ATLANTIC BEACH, FL 32233 US

Title: D () Delete
Name: BRYANT, JOSEPHINE
Address: 541 BLUEBERRY WOOD CIRCLE N.
City-St-Zip: JACKSONVILLE, FL 32233 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: O/D (X) Change () Addition
Name: MATHIS, ABBIE
Address: 9800 TOUCHTON RD APT 234
City-St-Zip: JACKSONVILLE, FL 32207 US

Title: D (X) Change () Addition
Name: DAUGHERTY, NEONA
Address: 7398 PURCEVILLE CT
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: RUMMELL, LEE ANN
Address: 1206 RIVER ROAD
City-St-Zip: JACKSONVILLE, FL 32207 US

Title: O/D (X) Change () Addition
Name: BRYANT, JOSEPHINE
Address: 541 BLUEBERRY WOOD CIRCLE N.
City-St-Zip: JACKSONVILLE, FL 32233 US

I hereby certify that the information supplied with this filing does not qualify for the 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: FLORENCE MATHIS

O/D

04/29/2006

Electronic Signature of Signing Officer or Director

Date