2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008764

Entity Name: THE MESSIAH CHRISTIAN CENTER, INC.

FILED May 09, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4906 HOPESPRING DRIVE ORLANDO, FL 32829 **Current Mailing Address: New Mailing Address:** P. O. BOX 721481 ORLANDO, FL 32872 US FEI Number: 03-0399557 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ROBINSON, FRED JR 4906 HOPESPRING DR ORLANDO, FL 32829 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: () Change () Addition () Delete ROBINSON, FRED JR. Name: Name: 4906 HOPESPRING DRIVE Address: Address: City-St-Zip: ORLANDO, FL 32829 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: WRIGHT, LESTER R VT Name: WRIGHT, LESTER R VT Address: 1524 LAMPLIGHTER WAY Address: 1524 LAMPLIGHTER WAY City-St-Zip: ORLANDO, FL 32818 City-St-Zip: ORLANDO, FL 32818 Title: () Delete Title: () Change () Addition SAMPSON, SCOTT D S Name: Name: 4859 HOPESPRING DRIVE Address: Address: City-St-Zip: ORLANDO, FL 32829 City-St-Zip: Title: () Delete Title: () Change () Addition M ARMSTRONG, DARREN Name: Name: 204 EVENING DRIVE Address: Address: City-St-Zip: CLERMONT, FL 34711 City-St-Zip: Title: () Delete Title: () Change (X) Addition ROBINSON, BARBARA L Name: Name: 4906 HOPESPRING DRIVE Address: Address: City-St-Zip: City-St-Zip: ORLANDO, FL 32829 Title: () Delete Title: () Change (X) Addition RANDALL, VERNON Name: Name: Address: Address: 5232 CINDERLANE PARKWAY City-St-Zip: ORLANDO, FL 32808 City-St-Zip:

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: FRED ROBINSON JR PD 05/09/2006