2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2006
Secretary of State

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Entity Name: CHRISTIAN ADVENT INTERNATIONAL, INC.

Current Principal Place of Business:

120 FLAMINGO AVENUE
DAYTONA BEACH, FL 32118 US

New Principal Place of Business:

629 SOUTH RIDGEWOOD AVENUE
DAYTONA BEACH, FL 32114 US

Current Mailing Address:

P.O. BOX 15136
DAYTONA BEACH, FL 32115 US

New Mailing Address:

FEI Number: 20-0253815 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCNULTY, KEVIN DR.
120 FLAMINGO AVENUE
DAYTONA BEACH, FL 32118 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: P ( ) Delete
Name: MCNULTY, KEVIN DR.
Address: 120 FLAMINGO AVENUE
City-St-Zip: DAYTONA BEACH, FL 32118 US

Title: VP ( ) Delete
Name: MCNULTY, LESLIE C DR.
Address: 120 FLAMINGO AVENUE
City-St-Zip: DAYTONA BEACH, FL 32118 US

Title: D ( ) Delete
Name: DECAMP, JOAN Y
Address: 120 FLAMINGO AVENUE
City-St-Zip: DAYTONA BEACH, FL 32118 US

Title: D ( ) Delete
Name: MCNULTY, KEVIN DR.
Address: 120 FLAMINGO AVENUE
City-St-Zip: DAYTONA BEACH, FL 32118 US

Title: D ( ) Delete
Name: MCNULTY, LESLIE C DR.
Address: 120 FLAMINGO AVENUE
City-St-Zip: DAYTONA BEACH, FL 32118 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change ( ) Addition
Name: DECAMP, JOAN Y
Address: 629 SOUTH RIDGEWOOD AVENUE
City-St-Zip: DAYTONA BEACH, FL 32114 US

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

Title: ( ) Change ( ) Addition
Name:
Address:
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: LESLIE C. MCNULTY VP 03/23/2006

Electronic Signature of Signing Officer or Director — Date