

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008282

FILED
Apr 30, 2008
Secretary of State

Entity Name: CHRISTIAN ADVENT INTERNATIONAL, INC.

Current Principal Place of Business:

629 SOUTH RIDGEWOOD AVENUE
DAYTONA BEACH, FL 32114 US

New Principal Place of Business:

1918 ATLANTIC AVE
DAYTONA BEACH SHORES, FL 32118 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.
629 SOUTH RIDGEWOOD AVENUE
DAYTONA BEACH, FL 32114 US

Name and Address of New Registered Agent:

MCNULTY, KEVIN DR.
1918 ATLANTIC AVE
DAYTONA BEACH SHORES, FL 32118 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:

04/30/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

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

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

Title: D () Delete
Name: HANCOCK, MARK
Address: 2489 JERRY CIRCLE
City-St-Zip: DAYTONA BEACH, FL 32128 US

Title: D () Delete
Name: REYNOLDS, SIMON
Address: 39 ACCLAIM AT LYON'S PAW
City-St-Zip: DAYTONA BEACH, FL 32124 US

Title: D () Delete
Name: MILLER, JEFF
Address: 1291 BRANDYWINE CIRCLE
City-St-Zip: BATAVIA, IL US

Title: D () Delete
Name: SCHOPKE, NEIL
Address: 1620 TANGERINE STREET
City-St-Zip: MELBOURNE, FL US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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 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 MCNULTY

VSD

04/30/2008

Electronic Signature of Signing Officer or Director

Date