2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2006
Secretary of State

DOCUMENT# N04000003953

Entity Name: CHRISTIAN HERITAGE MINISTRIES, INC.

Current Principal Place of Business:

4910 SW 205 AVE
SOUTHWEST RANCHES, FL 333321044

New Principal Place of Business:

Current Mailing Address:

4910 SW 205 AVE
SOUTHWEST RANCHES, FL 333321044

New Mailing Address:

FEI Number: 20-1023155 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WELLS, WILLIAM A
4910 SW 205 AVE
SOUTHWEST RANCHES, FL 333321044 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: WELLS, WILLIAM A
Address: 4910 SW 205 AVE
City-St-Zip: SOUTHWEST RANCHES, FL 333321044

Title: V ( ) Delete
Name: WALSH, THOMAS F
Address: 5440 OAKWOOD RD
City-St-Zip: PLANTATION, FL 33317

Title: S ( ) Delete
Name: GJERTSEN, MARY M
Address: 4910 SW 205TH AVE
City-St-Zip: SOUTHWEST RANCHES, FL 333321044

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: WELLS, WILLIAM A
Address: 4910 SW 205 AVE
City-St-Zip: SOUTHWEST RANCHES, FL 33332

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

Title: S (X) Change ( ) Addition
Name: GJERTSEN, MARY M
Address: 4910 SW 205 AVE
City-St-Zip: SOUTHWEST RANCHES, FL 33332

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: WILLIAM A. WELLS P 04/10/2006

Electronic Signature of Signing Officer or Director — Date