

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000010716

FILED
Sep 20, 2005
Secretary of State

Entity Name: CHRISTIANS ACROSS NATION, INC.

Current Principal Place of Business:

PO BOX 2333
PALM HARBOR, FL 34682

New Principal Place of Business:

Current Mailing Address:

PO BOX 2333
PALM HARBOR, FL 34682

New Mailing Address:

FEI Number: 76-0770301 **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:

GARCIA-RIVERA, LUIS ESQ.
2706 ALT. U.S. 19 N. STE 223
PALM HARBOR, FL 34683 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: LUIS GARCIA-RIVERA

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SEIDEL, KAY
Address: 2139 CHIANTI PLACE #156
City-St-Zip: PALM HARBOR, FL 34683

Title: D () Delete
Name: CARTIER, JENNIFER
Address: 9452 60TH ST. N
City-St-Zip: PINELLAS PARK, FL 33782

Title: D () Delete
Name: PROZINSKI, MARIA
Address: 960 PINEWOOD TERR
City-St-Zip: PALM HARBOR, FL 34684

Title: D () Delete
Name: GALLA, TAMMY
Address: 3197 WEBLEY DR
City-St-Zip: LARGO, FL 33771

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
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 Section 119.07(3)(i), 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: KAY SEIDEL

D

09/20/2005

Electronic Signature of Signing Officer or Director

Date