2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005483

Entity Name: CHRISTIAN HEARTBEAT, INC.

FILED Apr 30, 2006 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

1155 EUGENIA BLVD. 3039 NEEDLE PALM DR NEW SMYRNA BEACH, FL 32168 EDGEWATER, FL 32141

Current Mailing Address: New Mailing Address:

3039 NEEDLE PALM DR 1155 EUGENIA BLVD. EDGEWATER, FL 32141 NEW SMYRNA BEACH, FL 32168

FEI Number: 20-3512306 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BROUGHMAN, GARY H BROUGHMAN, GARY H 3039 NEEDLE PALM DR 1155 EUGENIA BLVD. NEW SMYRNA BEACH, FL 32168 US US EDGEWATER, FL 32141

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: 04/30/2006

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PRES () Delete (X) Change () Addition

BROUGHMAN, GARY H BROUGHMAN, GARY H Name: Name: Address: 1155 EUGENIA BLVD. Address: 3039 NEEDLE PALM DR

City-St-Zip: NEW SMYRNA BEACH, FL 32168 City-St-Zip: EDGEWATER, FL 32141

Title: () Delete Title: () Change () Addition

Name: ROSS, MARTHA C Name: Address: 1710 S. ATLANTIC AVE. Address: City-St-Zip: NEW SMYRNA BEACH, FL 32169 City-St-Zip:

Title: () Delete Title: () Change () Addition

WALKER, CLYDE Name: Name: 645 YUPON AVE. Address: Address:

City-St-Zip: NEW SMYRNA BEACH, FL 32169 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: GARY H BROUGHMAN **PRES** 04/30/2006