

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005483

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: CHRISTIAN HEARTBEAT, INC.

**Current Principal Place of Business:**

3039 NEEDLE PALM DR  
EDGEWATER, FL 32141

**New Principal Place of Business:**

**Current Mailing Address:**

3039 NEEDLE PALM DR  
EDGEWATER, FL 32141

**New Mailing Address:**

FEI Number: 20-3512306

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BROUGHMAN, GARY H  
3039 NEEDLE PALM DR  
EDGEWATER, FL 32141 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: PD ( ) Delete  
Name: BROUGHMAN, GARY H  
Address: 3039 NEEDLE PALM DR  
City-St-Zip: EDGEWATER, FL 32141

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

Title: VPD ( ) Delete  
Name: WALKER, CLYDE  
Address: 645 YUPON AVE.  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

**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:

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: GARY H. BROUGHMAN

PD

04/29/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date