

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012056

FILED
Jan 10, 2009
Secretary of State

Entity Name: CLASSICAL CHRISTIAN CONSULTANTS COMPANY, INC.

Current Principal Place of Business:

4105 CARRIAGE DR., STE. J4
POMPANO BEACH, FL 33069

New Principal Place of Business:

Current Mailing Address:

4105 CARRIAGE DR., STE. J4
POMPANO BEACH, FL 33069

New Mailing Address:

4105 CARRIAGE DR., STE. J4
POMPANO BEACH, FL 33069 US

FEI Number: 02-0756380

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
13302 WINDING OAKS BLVD
SUITE A-100
TAMPA, FL 336123425 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: CEO () Delete
Name: HUSEMANN, ANTHONY J PH.D.
Address: 4105 CARRIAGE DR., STE. J4
City-St-Zip: POMPANO BEACH, FL 33069 US

Title: VP () Delete
Name: ROSE, CRAIG PH.D.
Address: 4900 BRADLEY ST.
City-St-Zip: TEXARKANA, AR 71854 US

Title: TRES () Delete
Name: CHRISTOPHI, GEORGE
Address: 770 JAMES ST APT 806
City-St-Zip: SYRACUSE, NY 13203 US

Title: SECY () Delete
Name: MANASEH, NANCY L ED.D.
Address: 2401 W CYPRESS CREEK RD.
City-St-Zip: FT. LAUDERDALE, FL 33309 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
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: ANTHONY J HUSEMANN

CEO

01/10/2009

Electronic Signature of Signing Officer or Director

_____ Date