## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000004492

Name:

Address:

City-St-Zip:

WEATHENIGTON, BOBBIE

JACKSONVILLE, FL 32208

8758 NORFOLK BLVD.

FILED May 08, 2008 Secretary of State

Entity Nai	me: CHRISTWAY BIBLE MINISTRIES, INC.	
Current P	rincipal Place of Business:	New Principal Place of Business:
4783 LENG JACKSON	OX AVE IVILLE, FL 32204	3055 LENOX AVE JACKSONVILLE, FL 32204
Current Mailing Address:		New Mailing Address:
	FOLK BLVD. IVILLE, FL 32208	
	: 84-1709446 FEI Number Applied For() ce with s. 607.193(2)(b), F.S., the corporation did no	FEI Number Not Applicable ( ) Certificate of Status Desired (X) of receive the prior notice.
Name and	Address of Current Registered Agent:	Name and Address of New Registered Agent:
KELLY, ALEXIE 8758 NORFOLK BLVD. JACKSONVILLE, FL 32208 US		KELLY, TONGELA 8758 NORFOLK BLVD. JACKSONVILLE, FL 32208 US
The above in the State	named entity submits this statement for the $\mbox{\scriptsize \mu}$ e of Florida.	purpose of changing its registered office or registered agent, or both,
SIGNATUR	RE: TONGELA KELLY	05/08/2008
	Electronic Signature of Registered Age	ent Date
OFFICERS	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	P ( ) Delete KELLY, ALEXIE R 8758 NORFOLK BLVD. JACKSONVILLE, FL 32208	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	VPA () Delete KELLY, TONGELA L 8758 NORFOLK BLVD. JACKSONVILLE, FL 32208	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	S () Delete CLARK, PRISCILLA 7707 FALCON ST JACKSONVILLE, FL 32244	Title: S (X) Change ( ) Addition Name: FRANCIS, KENYETTA Address: 5621 MAHALIA DR City-St-Zip: JACKSONVILLE, FL 32209
Title:	MC ( ) Delete	Title: ( ) Change ( ) Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: TONGELA KELLY **VPA** 05/08/2008