## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 28, 2008 8:00 am Secretary of State

	<del></del>			Secretary of State
1. Entity Nam	MENT # N07000004 CHRISTIANS IN BUSINES			04-28-2008 90343 030 ****61.25
Principal Plac 8850 LYNWO SEMINOLE, F		Mailing Address 8850 LYNWOOD DR. SEMINOLE, FL 33772		I NEATHER AN ASIM JOHN BAIN SAIN BAIN BAIN BAIN BAIN BAIN BAIN AIN BAIN B
2. Principal P	tace of Business - No P.O. Box #	3. Mailing Address		
Suite, Apt.	<b>#</b> , etc.	Suite, Apt. #, etc.		04232008 Chg-NP CR2E037 (12/06)
City & Stat	е	City & State		4. FEI Number Applied For Si6 - 2656296 Not Applied For
Zip	Country	Zip	Country	5. Certificate of Status Desired Sa.75 Additional Fee Required
	6. Name and Address of Current	Registered Agent		7. Name and Address of New Registered Agent
HUFZIGER	R, ŠTACY WOOD DR.		Name Street Add	dress (P.O. Box Number is Not Acceptable)
	E. FL 33772			
	•	Fr. M.	City	FL Zip Code
8. The above the obligat	lions of registered agent.		agistered office or re	registered agent, or both, in the State of Florida. I am familiar with, and accep-
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ł	Filing Fee is \$61.25 Due by May 1, 2008	9. Election Camp Trust Fund Co		\$5.00 May Be Make check payable to
10.	<u> </u>	Trust Fund Co		\$5.00 May Be Make check payable to
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Due by May 1, 2008	Trust Fund Co	ntribution.	\$5.00 May Be Added to Fees Make check payable to Florida Department of State
TITLE NAME STREET ADDRESS	OFFICERS AND DIF PD HUFZIGER, STACY 8850 LYNWOOD DR.	Trust Fund Co	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	\$5.00 May Be Added to Fees Make check payable to Florida Department of State  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PD OFFICERS AND DIF PD HUFZIGER, STACY 8850 LYNWOOD DR. SEMINOLE, FL 33772 VD POTTER, KRISTINNA 1407 CROYDON DR.	Trust Fund Co	TITIDE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	\$5.00 May Be Added to Fees Florida Department of State  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  Change Addition  Change Addition  Change Addition  THE ASURE ISLAND FL 33706
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PD OFFICERS AND DIF PD HUFZIGER, STACY 8850 LYNWOOD DR. SEMINOLE, FL 33772 VD POTTER, KRISTINNA 1407 CROYDON DR. CLEARWATER, FL 33756 SD WEIGANDT, DIANE 6036 8TH AVE. NORTH	Trust Fund Con	TITIDE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	\$5.00 May Be Added to Fees
TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS STREET ADORESS STREET ADORESS	PD HUFZIGER, STACY 8850 LYNWOOD DR. SEMINOLE, FL 33772 VD POTTER, KRISTINNA 1407 CROYDON DR. CLEARWATER, FL 33756 SD WEIGANDT, DIANE 6036 8TH AVE. NORTH ST. PETERSBURG, FL 33710 TD WATROUS, PEGGY 775 115TH AVE.	Trust Fund Con	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	\$5.00 May Be Added to Fees Florida Department of State  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  Change Addition  Change Addition  WATROUS, PEGGY 115 II544 AVE TREASURE ISLAND FL 33706  SD Change Addition  Change Addition  Addition  Change Addition  Addition  SD Change Addition  Addition  STACY  8850 LYN WOOD DR  SEMINOLE, FL 33772

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

PLYLY WAYLOUS
NATUREAND TYPEN OF PRINTED NAME OF SIGNING OFFICER OR DIRECTO

4-23-08 727-455-1583

Daytime Phone