2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008078

Entity Name: CHRISTIAN LIFE, INC

Current Principal Place of Business:

FILED May 05, 2009 Secretary of State

1509 ALPHA ST SE PALM BAY, FL 32907

Current Mailing Address: New Mailing Address:

1509 ALPHA ST SE PALM BAY, FL 32907

FEI Number: 26-0745963 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

KILDAY, KEVIN G 1509 APPHA ST SE PALM BAY, FL 32907 US

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

New Principal Place of Business:

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

 Name:
 KILDAY, KEVIN G
 Name:

 Address:
 1509 ALPHA ST NE
 Address:

 City-St-Zip:
 PALM BAY, FL 32907
 City-St-Zip:

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

 Name:
 KILDAY, MARY E
 Name:

 Address:
 1509 ALPHA ST NE
 Address:

 City-St-Zip:
 PALM BAY, FL 32907
 City-St-Zip:

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

 Name:
 KILDAY, MARY E
 Name:

 Address:
 1509 ALPHA ST NE
 Address:

 City-St-Zip:
 PALM BAY, FL 32907
 City-St-Zip:

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

 Name:
 ROSBURY, PAUL H
 Name:

 Address:
 1773 PINEWOOD RD
 Address:

 City-St-Zip:
 MELBOURNE, FL 32934
 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: KEVIN KILDAY PRES 05/05/2009