2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000011012

FILED Mar 05, 2009 Secretary of State

Entity Name: CHRISTIAN READING TEA SOCIETY MINISTRY, INC.

	Principal Place of Business:	New Principal Place	
	RLY WAY O, FL 32818		
Current N	Mailing Address:	New Mailing Addres	s:
	RLY WAY O, FL 32818		
FEI Numbei	r: 30-0451596 FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of Current Registered Agent	Name and Address o	of New Registered Agent:
1111 LINC	STATES CORPORATE AGENTS, INC. COLN RD SUITE 400 ACH, FL 33139 US		
	e named entity submits this statement for the of Florida.	ne purpose of changing its registere	d office or registered agent, or both,
SIGNATU	RE:		
	Electronic Signature of Registered	Agent	Date
OFFICER	Electronic Signature of Registered S AND DIRECTORS:	_	Date ES TO OFFICERS AND DIRECTOR
Γitle: Name: Address:		_	
Fitle: Name: Nddress: Dity-St-Zip: Fitle: Name: Nddress:	P () Delete ROBINSON, MYRTICE 1132 BYERLY WAY	ADDITIONS/CHANG Title: Name: Address:	ES TO OFFICERS AND DIRECTOR
OFFICER Fitle: Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip:	P () Delete ROBINSON, MYRTICE 1132 BYERLY WAY ORLANDO, FL 32818 T () Delete MOORE, DOROTHY 1132 BYERLY WAY	ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	ES TO OFFICERS AND DIRECTOR () Change () Addition
Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Name: Address:	P () Delete ROBINSON, MYRTICE 1132 BYERLY WAY ORLANDO, FL 32818 T () Delete MOORE, DOROTHY 1132 BYERLY WAY ORLANDO, FL 32818 S () Delete ROBINSON, REBECCA 5206 CONA REEF CT	ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address:	ES TO OFFICERS AND DIRECTOR () Change () Addition () 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.

SIGNATURE: MYRTICE ROBINSON P 03/05/2009