

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17387

FILED
Mar 06, 2009
Secretary of State

Entity Name: CHRISTIAN TELEVISION NETWORK, INC.

Current Principal Place of Business:

6922 142ND AVE. N
LARGO, FL 33771 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 6922
CLEARWATER, FL 33758 US

New Mailing Address:

FEI Number: 59-2724505

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

D'ANDREA, ROBERT
6922 142ND AVENUE N.
LARGO, FL 33771 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: PD () Delete
Name: D'ANDREA, ROBERT
Address: 6922 142ND AVE N
City-St-Zip: LARGO, FL 33771

Title: STD () Delete
Name: WETZEL, WAYNE
Address: 6922 142ND AVE N
City-St-Zip: LARGO, FL 33771

Title: SD () Delete
Name: VIRGINIA, OLIVER
Address: 6922 142ND AVE. N.
City-St-Zip: LARGO, FL 33771

Title: D () Delete
Name: SCOTT, YOUNG
Address: 6922 142ND AVE. N.
City-St-Zip: LARGO, FL 33771

Title: TD () Delete
Name: JIMMY, SMITH
Address: 6922 142ND AVE. N.
City-St-Zip: LARGO, FL 33771

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:

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: ROBERT DANDREA

PRES

03/06/2009

Electronic Signature of Signing Officer or Director

Date