2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2005
Secretary of State

DOCUMENT# N18116

Entity Name: THE CHRISTIAN SHARING CENTER, INC.

Current Principal Place of Business:

600 NORTH HIGHWAY 17/92
SUITE 158
LONGWOOD, FL 32750 US

New Principal Place of Business:

Current Mailing Address:

600 NORTH HIGHWAY 17/92
SUITE 158
LONGWOOD, FL 32750 US

New Mailing Address:

FEI Number: 59-2744535 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROMAGOSA, ANGELA M
210 COLUMBUS CIRCLE
LONGWOOD, FL 32750 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: FROEHLICH, WILLIAM
Address: 522 ASTRIA STREET
City-St-Zip: ALTAMONTE SPRINGS, FL 32701 US

Title: TD ( ) Delete
Name: BROWN, NANCY
Address: 1474 HIDDEN RIDGE COVE
City-St-Zip: LONGWOOD, FL 32750 US

Title: VD ( ) Delete
Name: WILLIAMS, JIMMY
Address: 4969 COURTLAND LOOP
City-St-Zip: WINTER SPRINGS, FL 327084029 US

Title: SD ( ) Delete
Name: CHASTAIN, MARK
Address: 1547 STARGAZER TERRACE
City-St-Zip: SANFORD, FL 32771 US

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CHD (X) Change ( ) Addition
Name: KOHL, ROBERT
Address: 877 PADDINGTON TERR
City-St-Zip: HEATHROW, FL 32746 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VCHD (X) Change ( ) Addition
Name: HOYER, PAUL REV.
Address: 760 SUN DRIVE
City-St-Zip: LAKE MARY, FL 32746 US

Title: SD (X) Change ( ) Addition
Name: WILLIAMS, JIM
Address: 4969 COURTLAND LOOP
City-St-Zip: WINTER SPRINGS, FL 32708 US

Title: D ( ) Change (X) Addition
Name: VAN DER WEIDE, DICK
Address: 104 SWEETWATER HILLS DR
City-St-Zip: LONGWOOD, FL 32779 US

Title: D ( ) Change (X) Addition
Name: FROEHLICH, WILLIAM
Address: 522 ASTRIA ST.
City-St-Zip: ALTAMONTE SPRINGS, FL 32701 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: H. ROBERT KOHL CHD 04/07/2005

Electronic Signature of Signing Officer or Director — Date