
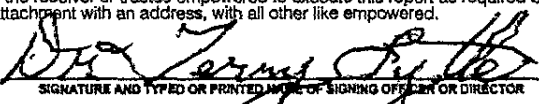


**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Apr 20, 2006 08:00 AM
Secretary of State**

DOCUMENT # N50126 1. Entity Name DRIVE-IN CHURCHES, INC.		
Principal Place of Business 13155 - 40 STREET NORTH CLEARWATER, FL 33762 US	Mailing Address PO BOX 12345 SAINT PETERSBURG, FL 33733 US	
DO NOT WRITE IN THIS SPACE		
8. Name and Address of Current Registered Agent PIPPEN, JOSEPH F., JR. 10225 ULMERTON ROAD BUILDING 11 LARGO, FL 34841		DO NOT WRITE IN THIS SPACE
9. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and file if applicable (NOTE: Registered Agent signature required when reappointing)</small> DATE _____		
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DC RALSTON, DONALD 1480 CAIRN CT PALM HARBOR, FL 34683	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PRES LYTLE, TERRY 6035 113TH AVENUE NORTH PINELLAS PARK, FL 33782	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GEORGE, MILAN SR 49800 W 6 MI RD NORTHVILLE, MI 48167	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TRES CHRISTENSON, VIC H 8937-109 LANE N SEMINOLE, FL 33772	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BEARD, KEN 222 CITRUS DUNEDIN, FL 34698	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D EHNIS, RICHARD 1276 EAGLE POINT CLARKLAKE, MI 49234	
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:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Terry Lytle 4/18/06 727 577 <small>Date Daytime Phone #</small>



04182006 No Chg-NP CR2E037 (11/05)

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

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05/02/06-80127-005 61.25