2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50338

FILED Jul 15, 2008 Secretary of State

Entity Name: CHRISTIAN EXTENSION MINISTRIES, INC

Current P	rincipal Place of Bu	siness:	New Princ	ipal Place of	Business:
	/ERSITY DR			NTIC BLVD	
220 CORAL SI	PRINGS, FL 33071	US	MARGATE	E, FL 33063	US
Current M	lailing Address:		New Maili	ng Address:	
1750 UNIV	/ERSITY DR				
220 CORAL SI	PRINGS, FL 33071				
		lumber Applied For() FEI N F.S., the corporation did not receive	umber Not App e the prior notic		Certificate of Status Desired ()
Name and	d Address of Current	t Registered Agent:	Name and	Address of I	New Registered Agent:
220 CORAL SI	PRINGS, FL 33071 L		of changing	its registered o	office or registered agent, or bot
n the State	e of Florida.	s this statement for the purpose	3 3		
	e of Florida. É	nature of Registered Agent			Date
n the State	e of Florida. É	nature of Registered Agent		IS/CHANGES	Date TO OFFICERS AND DIRECTO
n the State	e of Florida. RE: Electronic Sigr	nature of Registered Agent			
n the State SIGNATUI DFFICER: Title: Jame: Address:	e of Florida. RE: Electronic Sign S AND DIRECTORS: P () Delete MARINO, OSVALDO OS 1750 UNIVERSITY DR	nature of Registered Agent SCA, R 33071 US	ADDITION Title: Name: Address:	(TO OFFICERS AND DIRECT
n the State BIGNATUI DFFICER: Title: Jame: Address: City-St-Zip: Title: Jame: Address:	e of Florida. RE: Electronic Sign S AND DIRECTORS: P () Delete MARINO, OSVALDO OS 1750 UNIVERSITY DR CORAL SPRINGS, FL S () Delete LARES, GUILLERMO 1750 UNIVERSITY DR	nature of Registered Agent SCA, R 33071 US	ADDITION Title: Name: Address: City-St-Zip: Title: Name: Address:	(TO OFFICERS AND DIRECTO) 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: OSVALDO MARINO P 07/15/2008