

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002329

FILED
May 02, 2006
Secretary of State

Entity Name: CHRIST AID, INC.

Current Principal Place of Business:

4150 MT STERLING
TITUSVILLE, FL 32780 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 854
MIMS, FL 32754

New Mailing Address:

FEI Number: 59-3353310 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BRADLEY, FRANCIS M
427 TIMBERLAKE DRIVE
MELBOURNE, FL 32940 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: D () Delete
Name: CHAMBERLAIN, JEFF
Address: 4150 MT STERLING
City-St-Zip: TITUSVILLE, FL 32780

Title: VD () Delete
Name: GALLAGHER, MIKE
Address: 743 PLANTATION DR.
City-St-Zip: TITUSVILLE, FL 32780

Title: SD () Delete
Name: DESHLER, BARBARA
Address: 1800 JAMES CIRCLE
City-St-Zip: TITUSVILLE, FL 32781

Title: D () Delete
Name: RENCH, BOB
Address: 952 GRANDE HAVEN DR.
City-St-Zip: TITUSVILLE, FL 32780

Title: PD () Delete
Name: TUCKER, CHARLES W
Address: 2743 NOTTINGHAM CT.
City-St-Zip: TITUSVILLE, FL 32796

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: GALLAGHER, IRENE
Address: 743 PLANTATION DR.
City-St-Zip: TITUSVILLE, FL 32780

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 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: JEFF CHAMBERLAIN

D

05/02/2006

Electronic Signature of Signing Officer or Director

Date