2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N95000003228

1. Entity Name

CHRIST FOR THE CITIES, INC.



Principal Place of Business

Mailing Address

3251 SAN BERNADINO STREET, SUITE 333 CLEARWATER, FL 33759 US 3251 SAN BERNADINO STREET, SUITE 333 CLEARWATER, FL 33759 US FILED Apr 21, 2008 08:00 AN Secretary of State



DO NOT WRITE IN THIS SPACE

01042008 No Chg-NP CR2E037 (4/06)

 4. FEI Number
 Applied For

 59-3323817
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BRUYNELL, JOHN E 3251 SAN BERNADINO ST STE 333 CLEARWATER, FL 33759

DO NOT WRITE
IN 33759
IN THIS SPACE

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	named entity submits this statement for the pulions of registered agent.	rpose of changing its registered	d office or re	egistered agent, or bot	h, in the State of Florida	a. I am familiar with, and ac	ccept
SIGNATURE.	Signature, typed or printed name of registered agent and title if	applicable. (NOTE Registered	Agent signature	required when reinstating)		DATE	
	Filing Fee is \$61.25 Due by May 1, 2008 9. Election Campaign Financ Trust Fund Contribution.		cing	\$5.00 May Be Added to Fees	000000913827 05708708-80031-017 61.25		
10.	OFFICERS AND DIRECTORS						
IITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BRUYNELL, JOHN E 3251 SAN BERNADINO ST, STE 333 CLEARWATER, FL 33759		. •	×			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HAWKINSON, DON 3251 SAN BERNADINO ST, STE 333 CLEARWATER, FL 33759	**	÷				."
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MOORE, MIKE 3251 SAN BERNADINO ST, STE 333 CLEARWATER, FL 33759			DO	NOT WE	RÎŢĒ	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			· .	IN ⁻	THIS SPA	ACE	•
TITLE NAME STREET ADDRESS CITY-ST-ZIP							•
TITLE NAME				ŗ ,			

12. Thereby certify that the information supplied with this filling 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:

STREET ADDRESS
CITY-ST-ZIP

INFTYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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