2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9600000237

FILED Apr 12, 2007 Secretary of State

Entity Name: ANGEL CHRISTIAN TELEVISION TRUST, INC.

Current Principal Place of Business:					New Principal Place of Business:			
375 DOUG SUITE 100 ALTAMON		FL 32714	US					
Current Mailing Address:					New Mailing Address:			
375 DOUG SUITE 100 ALTAMON		FL 32714	US					
FEI Number:	59-3359547	FEI Number	Applied For ()	FEI Numi	ber Not Appli	cable ()	Certificate of Sta	tus Desired (X)
Name and	Address of C	urrent Regi:	stered Agent:		Name and	Address of	New Registered	Agent:
BEIK, STEPHEN W 375 DOUGLAS AVE. SUITE 1008 ALTAMONTE SPRINGS, FL 32714 US 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.								
SIGNATUR	RE:							
	Electroni	ic Signature	of Registered Age	nt			Date	
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PD () STEPHEN, ROR 8209 SURRY RI FREDERICKSB	D .	7 US	1	Title: Name: Address: City-St-Zip:	() Change ()Additio	on
Title: Name: Address: City-St-Zip:	TD () STEPHEN, WEN 8209 SURRY RI FREDERICKSBI	D .	7 US	1	Title: Name: Address: City-St-Zip:	() Change () Addition	on
Title: Name: Address: City-St-Zip:	SD () BEIK, STEPHEN 405 DOUGLAS A ALTAMONTE SE	AVE., SUITE 15		1	Title: Name: Address: City-St-Zip:	BEIK, STEPH 375 DOUGLA	X) Change ()Addition EN W S AVE., SUITE 1008 SPRINGS, FL 32714	
Title: Name: Address: City-St-Zip:	D () FRANGIPANE, F 1275 E KNOLL I ROBINS, IA 523	ORIVE		1	Title: Name: Address: City-St-Zip:	D (A FRANGIPANE 1275 E KNOL ROBINS, IA 5	L DRIVE	on
Title: Name: Address: City-St-Zip:	D () SPEIRS, MARY 3 JELIESTON TI UK, KA5 7J2		A	1	Title: Name: Address: City-St-Zip:	SPEIRS, MAR 3 JELIESTON	X) Change ()Addition RILYN M TERRACE PATNA K KA5 7J2 UK	on
Title: Name: Address: City-St-Zip:	D (X) SPEIRS, MARY 3 JELIESTON TI AYRSHIRE, UK	ERRACE PATN	A	1	Title: Name: Address: City-St-Zip:	() Change () Addition	on

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: STEPHEN W. BEIK S 04/12/2007