# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jan 05, 2007**
**Secretary of State**

DOCUMENT# N96000000985

**Entity Name:** CHURCH SERVICES INTERNATIONAL, INC.

**Current Principal Place of Business:**

9015 40TH STREET
PINELLAS PARK, FL 33782 US

**New Principal Place of Business:**

**Current Mailing Address:**

9015 40TH STREET
PINELLAS PARK, FL 33782 US

**New Mailing Address:**

**FEI Number: 59-3370105** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LUNSFORD, DONALD W
9015 40TH STREET
PINELLAS PARK, FL 33782 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: | LUNSFORD, BEVERLY A | |
| Address: | 9015 40TH STREET | |
| City-St-Zip: | PINELLAS PARK, FL 33782 | |
| Title: | P | ( ) Delete |
| Name: | LUNSFORD, DONALD | |
| Address: | 9015 40TH STREET | |
| City-St-Zip: | PINELLAS PARK, FL 33782 | |
| Title: | D | ( ) Delete |
| Name: | LUNSFORD, MARK | |
| Address: | 13222 MORAN DRIVE | |
| City-St-Zip: | TAMPA, FL 33618 | |
| Title: | D | ( ) Delete |
| Name: | LUNSFORD, ANNE | |
| Address: | 13222 MORAN DRIVE | |
| City-St-Zip: | TAMPA, FL 33618 | |
| Title: | D | ( ) Delete |
| Name: | MALZ, CRAIG | |
| Address: | 4103 DEERFIELD DRIVE | |
| City-St-Zip: | CONCORD, NC 28027 | |
| Title: | D | ( ) Delete |
| Name: | MALZ, ANGELA | |
| Address: | 4103 DEERFIELD DRIVE | |
| City-St-Zip: | CONCORD, NC 28027 | |

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

| | |
|---|---|
| Title: | ( ) Change ( ) Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |
| Title: | ( ) Change ( ) Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |
| Title: | ( ) Change ( ) Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |
| Title: | ( ) Change ( ) Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |
| 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: DONALD W LUNSFORD P 01/05/2007

Electronic Signature of Signing Officer or Director — Date