

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001734

FILED
Feb 18, 2009
Secretary of State

Entity Name: CHRISTIAN DISASTER RESPONSE INTERNATIONAL, INC.

Current Principal Place of Business:

200 AVE K SE
5
WINTER HAVEN, FL 33880

New Principal Place of Business:

212 DAIRY ROAD
AUBURNDALE, FL 33823

Current Mailing Address:

P.O. BOX 3339
WINTER HAVEN, FL 33885

New Mailing Address:

FEI Number: 59-3366833 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

DALLAS, CLYDE H
1616 PINE GLEN ROAD
LAKELAND, FL 33809 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: KEENEN, MARY J
Address: 1014 THOMAS RD.
City-St-Zip: LAKELAND, FL 33809

Title: PD () Delete
Name: RHAN, WILLAM R
Address: 3370 N.E. 53RD TERRACE
City-St-Zip: HIGH SPRINGS, FL 32643

Title: SD () Delete
Name: PATTERSON, RONNIE A
Address: 713 ROSE ST. S. # 10
City-St-Zip: AUBURNDALE, FL 33823

Title: D () Delete
Name: MILLER, PAUL
Address: 2218 BROOKVIEW DRIVE
City-St-Zip: VANCOVER, WA 98686

Title: VPD () Delete
Name: PENNINGTON, JOSEPH
Address: 106 EAST RAYBURN ROAD
City-St-Zip: PLANT CITY, FL 33566

Title: TD () Delete
Name: PATTERSON, RUTH S
Address: 713 ROSE ST S, # 10
City-St-Zip: AUBURNDALE, FL 33823

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: VPD (X) Change () Addition
Name: BUTCHER, DONALD
Address: 852 S. MCKINNEY ROAD
City-St-Zip: OTHELLO, WA 99344

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

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: RONNIE A PATTERSON

D/S

02/18/2009

Electronic Signature of Signing Officer or Director

Date