2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9800000008

Entity Name: CHRISTIANS IN RECOVERY, INC.

Current Principal Place of Business:		New Principal Place of Business:		
221 GOLFVIEW DRIVE TEQUESTA, FL 33469				
Current Mailing Address:		New Mailing Address:		
PO BOX 4422 TEQUESTA, FL 33469				
FEI Number: 65-0800537	FEI Number Applied For()	FEI Number Not Applicable()	Certificate of Status Desired()	
Name and Address of Current Registered Agent:		Name and Address of	Name and Address of New Registered Agent:	
RDENNAN SUSAN				

FILED Apr 14, 2009 Secretary of State

SRENNAN, SUSAN 221 GOLFVIEW DRIVE TEQUESTA, FL 33469 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.

SIGNATURE:						
	Electronic Signature of Registered Agent		Date			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:		Title: Name: Address: City-St-Zip:	2400 BASELINE AVE SUITE 232			
Title:	S () Delete	Title:	S (X) Change () Addition			
Name:	THORE, CLARA	Name:	THORE, CLARA			
Address:	2818 EDWARDS ST	Address:	2818 EDWARDS ST			
City-St-Zip:	WINSTON SALEM, NC 27127	City-St-Zip:	WINSTON SALEM, NC 27127 US			
Title:	T () Delete	Title:	3881 MIDDLE RD			
Name:	CUNNINGHAM, RUTH	Name:				
Address:	3881 MIDDLE RD	Address:				
City-St-Zip:	SIDNEY, ME 04330	City-St-Zip:				
Title:	V () Delete	Title:	V (X) Change () Addition			
Name:	COATES, JANICE	Name:	COATES, JANICE			
Address:	1105 MURFIELD VILLAGE	Address:	1105 MURFIELD VILLAGE			
City-St-Zip:	COLLEGE STATION, TX 77845	City-St-Zip:	COLLEGE STATION, TX 77845 US			
Title:	()Delete	Title:	D () Change (X) Addition			
Name:		Name:	BALDWIN, CINDY			
Address:		Address:	24-2803 MARBLE HILL DRIVE			
City-St-Zip:		City-St-Zip:	ABBOTSFORD, BC V3G 2Y4 CA			
Title:	()Delete	Title:	ED () Change (X) Addition			
Name:		Name:	BRENNAN, SUSAN O			
Address:		Address:	221 GOLFVIEW DR.			
City-St-Zip:		City-St-Zip:	TEQUESTA, FL 33469 US			

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:	SUSAN O. BRENNAN	ED	04/14/2009
Electronic Signature of Signing Officer or Director			Date