

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000497

FILED
Mar 31, 2009
Secretary of State

Entity Name: INTERNATIONAL CHRISTIAN SERVICES, INC.

Current Principal Place of Business:

160 INDEPEDENCE AVE.
PALM HARBOR, FL 34684

New Principal Place of Business:

Current Mailing Address:

160 INDEPEDENCE AVE.
PALM HARBOR, FL 34684

New Mailing Address:

FEI Number: 65-0825298

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MACINTOSH, SHERRY
160 INDEPENDENCE AVE.
PALM HARBOR, FL 34684 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: DP () Delete
Name: MACINTOSH, SHERRY
Address: 160 INDEPENDENCE AVE.
City-St-Zip: PALM HARBOR, FL 34684

Title: DVP () Delete
Name: MCLAIN, BARBARA
Address: 3659 ROLANDO DR.
City-St-Zip: PALM HARBOR, FL 34683

Title: DS () Delete
Name: MACINTOSH, DAVID
Address: 160 INDEPENDENCE AVE.
City-St-Zip: PALM HARBOR, FL 34684

Title: DT () Delete
Name: JOHANNEMAN, CHAD
Address: 2229 N. FAIR OAKS AVE
City-St-Zip: TUCSON, AZ 85712

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:

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: SHERRY MACINTOSH

PRES

03/31/2009

Electronic Signature of Signing Officer or Director

Date