


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 10, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000104489
1. Entity Name
CHRISTIAN DEVELOPMENT GROUP, INC.



Principal Place of Business Mailing Address
906 BLACK KNIGHT DRIVE **906 BLACK KNIGHT DRIVE**
VALRICO, FL 33594 **VALRICO, FL 33594**



01042006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 90-0114569	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
CHRISTIAN, KAREN W
906 BLACK KNIGHT DR
VALRICO, FL 33594

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHRISTIAN, CLAIBORNE J III 906 BLACK KNIGHT DRIVE VALRICO, FL 33594
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHRISTIAN, CLAIBORNE J JR 906 BLACK KNIGHT DRIVE VALRICO, FL 33594
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHRISTIAN, KAREN W 906 BLACK KNIGHT DRIVE VALRICO, FL 33594
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHRISTIAN, MYRTLE C 906 BLACK KNIGHT DRIVE VALRICO, FL 33594
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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03/21/06-80034-001 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 607, Florida Statutes and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Claborne J Christian III* *March 6 2006* *813-731-1795*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #