2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000070421

Entity Name: CHURCH RISK MANAGEMENT, INC.

FILED Aug 31, 2009 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

1109 CEPHIA STREET 2996 DAYTON DR

LAKE WALES, FL 33853 WINTER HAVEN, FL 33884 US

Current Mailing Address: New Mailing Address:

P.O. BOX 1017 2996 DAYTON DR

LAKE WALES, FL 33859 US WINTER HAVEN, FL 33884 US

FEI Number: 59-3347931 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

KOON, DAVID
1109 CEPHIA STREET
KOON, DAVID
2996 DAYTON DR

LAKE WALES, FL 33853 US WINTER HAVEN, FL 33884 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: 08/31/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 KOON, DAVID
 Name:
 KOON, DAVID

 Address:
 1109 CEPHIA STREET
 Address:
 2996 DAYTON DR

City-St-Zip: LAKE WALES, FL 33853 City-St-Zip: WINTER HAVEN, FL 33884

Title: SD () Delete Title: SD (X) Change () Addition

Name: KOON, CHARLENE M Name: KOON, CHARLENE M Address: 1109 CEPHIA STREET Address: 2996 DAYTON DR

City-St-Zip: LAKE WALES, FL 33853 City-St-Zip: WINTER HAVEN, FL 33884

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID KOON PD 08/31/2009

Electronic Signature of Signing Officer or Director

Date