

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 712473

FILED
Apr 19, 2002 8:00 AM
Secretary of State

Entity Name: THE CHRISTIAN AND MISSIONARY ALLIANCE FOUNDATION, INC.

Current Principal Place of Business:

C/O SHELL POINT VILLAGE
15000 SHELL POINT BLVD.
FT. MYERS, FL 33908

New Principal Place of Business:

Current Mailing Address:

C/O SHELL POINT VILLAGE
15000 SHELL POINT BLVD.
FT. MYERS, FL 33908

New Mailing Address:

FEI Number: 59-1166437 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DYS, PETERS
14731 FAIRHAVEN ST.
FT MYERS, FL 33908 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: TD () Delete
Name: ARNOLD, RICHARD L
Address: 3104 SPRING MEADOW DRIVE
City-St-Zip: COLORADO SPRINGS, CO 80906

Title: PD () Delete
Name: CATHEY, GORDON M. DR,
Address: 1121 WINDMILL LN
City-St-Zip: SILVER SPRING, MD

Title: SD () Delete
Name: DEWITT, CHARLES B. (, REV)
Address: 9 VILLAGE CIRCLE
City-St-Zip: MENDHAM, NJ 07945

Title: EV () Delete
Name: DYS, PETER (ASSIST-S,)
Address: 14731 FAIRHAVEN RD
City-St-Zip: FORT MYERS, FL 33908

Title: AT () Delete
Name: BAYES, DENNIS,
Address: 15055 TAMARIND CAY COURT #1210
City-St-Zip: FORT MYERS, FL 33908

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD (X) Change () Addition
Name: CATHEY, GORDON M. DR,
Address: 1121 WINDMILL LN
City-St-Zip: SILVER SPRING, MD 20905

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 for the exemption stated in Section 119.07(3)(i), 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: PETER DYS

EV

04/19/2002

Electronic Signature of Signing Officer or Director

_____ Date