

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755495

FILED
Mar 24, 2011
Secretary of State

Entity Name: CHRISTIAN HEALING MINISTRIES, INC.

Current Principal Place of Business:

438 WEST 67TH ST.
JACKSONVILLE, FL 322080520

New Principal Place of Business:

Current Mailing Address:

438 WEST 67TH ST.
P.O. BOX 9520
JACKSONVILLE, FL 322080520

New Mailing Address:

FEI Number: 59-2144931

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JENKINS, MERLE L
438 WEST 67TH ST
JACKSONVILLE, FL 32208 US

Name and Address of New Registered Agent:

RECINELLA, DALE S
438 WEST 67TH ST
JACKSONVILLE, FL 32208 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: /DALE S. RECINELLA/

03/24/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: MACNUTT, JUDITH
Address: 4979 RAVENEL PLACE
City-St-Zip: JACKSONVILLE, FL 32225

Title: DCOB
Name: RUMMELL, LEE ANN
Address: 2538 RIVER ROAD
City-St-Zip: JACKSONVILLE, FL 322074019

Title: DS
Name: CERVENY, EMMY P
Address: 3711 ORTEGA BLVD
City-St-Zip: JAX, FL 32210

Title: D
Name: MACNUTT, FRANCIS
Address: 4879 RAVENEL PLACE
City-St-Zip: JACKSONVILLE, FL 32225

Title: DT
Name: SMITH, TAYLOR M
Address: 4118 ORTEGA FOREST DRIVE
City-St-Zip: JACKSONVILLE, FL 32210

Title: VP F
Name: RECINELLA, DALE S
Address: 109 MARGARETT ST
City-St-Zip: MACCLENY, FL 32063

I hereby 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 all other like empowered.

SIGNATURE: /DALE S. RECINELLA/

VP F

03/24/2011

Electronic Signature of Signing Officer or Director

Date