

F10000003848

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

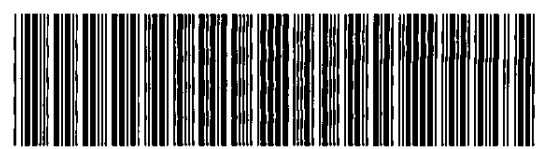
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400184673874

08/26/10--01013--008 \*\*78.75

2010 AUG 26 PM 2:08  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

*J* 8/27/10

**COVER LETTER**

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Christopher Ministries, Inc.  
Name of Corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", or "Certificate of Good Standing" and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

Tracia H. Jungkurth  
Name of Person

Christopher Ministries, Inc.  
Firm/Company

505 Seaport Blvd.  
Address

Cape Canaveral, FL 32920  
City/State and Zip Code

Cministry@att.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tracia H. Jungkurth at (321) 799-1863  
Name of Person Area Code & Daytime Telephone Number

**MAILING ADDRESS:**  
New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

2010 AUG 26 PM 2:08  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA**

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

1. Christopher Ministries, Incorporated  
(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)
2. Tennessee 3. 31-1700990  
(State or country under the law of which it is incorporated) (FEL number, if applicable)
4. 5/2000 5. Corporation is Perpetual (ongoing)  
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. - N/A  
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)
7. 505 Seaport Blvd. - Cape Canaveral, FL 32920  
(Principal office address)
- P.O. Box 1368 - Cape Canaveral, FL 32920  
(Current mailing address)

8. Mental Health Counseling - Care for those that are poor or in need - financially -  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)
- Name: Tracia H. Jungkurth
- Office Address: 505 Seaport Blvd.  
Cape Canaveral, Florida 32920  
(City) (Zip Code)

FILED  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS  
 2010 AUG 26 PM 2:08

10. Registered agent's acceptance:  
*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

Tracia H. Jungkurth  
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors:

FL. DEPT.  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

A. DIRECTORS

N/A

2010 AUG 26 PM 2:08

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

B. OFFICERS

President: Tracia H. Jungkurth

Address: 505 Seaport Blvd.

Cape Canaveral, FL 32920

Vice President: Vic Jungkurth

Address: 505 Seaport Blvd.

Cape Canaveral, FL

Secretary: Betty Stephens

Address: 1610 Alsdale Rd. - Mt. Juliet, TN 37122

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Tracia H. Jungkurth

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Tracia H. Jungkurth, President

(Typed or printed name and capacity of person signing application)



STATE OF TENNESSEE  
Tre Hargett, Secretary of State  
Division of Business Services  
312 Rosa L. Parks Avenue  
6th Floor, William R. Snodgrass Tower  
Nashville, TN 37243

**CHRISTOPHER MINISTRIES INC.**

July 16, 2010

P O BOX 555  
MOUNT JULIET, TN 37121

*Mailed  
7/16 to us*

**Request Type: Certificate of Existence/Authorization**

Issuance Date: 07/16/2010

Request #: 0017470

Copies Requested: 1

**Document Receipt**

Receipt #: 221214

Filing Fee: \$20.00

Payment-Check/MO - CHRISTOPHER MINISTRIES INC., MOUNT JULIET, TN

\$20.00

**Regarding: CHRISTOPHER MINISTRIES, INC.**

Filing Type: Corporation Non-Profit - Domestic

Control #: 601205

Charter/Qualification Date: 04/23/2009

Date Formed: 04/23/2009

Status: Active

Formation Locale: Wilson County

Duration Term: Perpetual

Inactive Date:

**CERTIFICATE OF EXISTENCE**

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

**CHRISTOPHER MINISTRIES, INC.**

\* is a Corporation duly incorporated under the law of this State with a date of incorporation and duration as given above;

\* has paid all fees, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business;

\* has filed the most recent corporation annual report required with this office;

\* has appointed a registered agent and registered office in this State;

\* has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

*Tre Hargett*

Tre Hargett, Secretary of State  
Business Services Division

2010 AUG 26 PM 2:08

SECRETARY OF STATE  
DIVISION OF CORPORATIONS

Processed By: Deborah Chaney