

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002486

FILED  
Jan 31, 2011  
Secretary of State

**Entity Name:** CAMBODIAN CHRISTIAN ARTS MINISTRY, INC.

**Current Principal Place of Business:**

892 SOUND HARBOR CIRCLE  
GULF BREEZE, FL 32563 US

**New Principal Place of Business:**

**Current Mailing Address:**

POB 1044  
BREVARD, NC 28712 US

**New Mailing Address:**

**FEI Number:** 01-0726882

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HARGER, JOANNA  
892 SOUND HARBOR CIRCLE  
GULF BREEZE, FL 32563 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: D  
Name: MICHELOTTI, JOY  
Address: 4 OAK BROOK E LN  
City-St-Zip: BREVARD, NC 28712 US

Title: D  
Name: KIM, NOREN V  
Address: 4 OAK BROOK E LN  
City-St-Zip: BREVARD, NC 28712 US

Title: D  
Name: CRABBE, MARTHA B  
Address: 4 OAK BROOK E LANE  
City-St-Zip: BREVARD, NC 28712 US

Title: D  
Name: TY, SOPHUN  
Address: 4 OAK BROOK EAST LANE  
City-St-Zip: BREVARD, NC 28712 US

Title: D  
Name: HEFLIN, HARRY  
Address: 2661 SUNNYDALE DRIVE  
City-St-Zip: DUARTE, CA 91010 US

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: MARTHA B. CRABBE

D

01/31/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date