

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000006802

FILED
Jul 28, 2009
Secretary of State

Entity Name: CHRISTIAN COALITION MISSIONARY INC.

Current Principal Place of Business:

5575 KUMQUAT RD.
WEST PALM BEACH, FL 33413

New Principal Place of Business:

17438 81 LANE N
LOXAHATCHEE, FL 33470

Current Mailing Address:

5575 KUMQUAT RD.
WEST PALM BEACH, FL 33413

New Mailing Address:

17438 81 LANE N
LOXAHATCHEE, FL 33470

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DULCIO, HENRY C
5575 KUMQUAT RD.
WEST PALM BEACH, FL 33413 US

Name and Address of New Registered Agent:

NOCENT, JEAN R REV.
17438 81 LANE N
LOXAHATCHEE, FL 33470 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: JEAN ROBERT NOCENT

07/28/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DULCIO, HENRY C
Address: 5575 KUMQUAT RD.
City-St-Zip: WEST PALM BEACH, FL 33413

Title: VP () Delete
Name: BENJAMIN, GASPARD
Address: 5575 KUMQUAT RD.
City-St-Zip: WEST PALM BEACH, FL 33413

Title: S () Delete
Name: PIERRE PAUL, JOSEPH P
Address: 5575 KUMQUAT RD.
City-St-Zip: WEST PALM BEACH, FL 33414

Title: T () Delete
Name: POPE, KRAIG K
Address: 5575 KUMQUAT RD.
City-St-Zip: WEST PALM BEACH, FL 33413

Title: T (X) Delete
Name: JEANBAPTISTE, MARIA
Address: 5575 KUMQUAT RD.
City-St-Zip: WEST PALM BEACH, FL 33413

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: NOCENT, JEAN R REV.
Address: 17438 81 LANE N
City-St-Zip: LOXAHATCHEE, FL 33470

Title: VP (X) Change () Addition
Name: BENJAMIN, GASPARD
Address: 108 SW HAWTHORNE CIR
City-St-Zip: PORT ST LUCIE, FL 34953

Title: S (X) Change () Addition
Name: JEANBAPTISTE, MARIA
Address: 735 W KALMIA DR
City-St-Zip: LAKE PARK, FL 33403

Title: T (X) Change () Addition
Name: LAURORE, JEAN
Address: 5901 TRIPHAMMER RD
City-St-Zip: LAKE WORTH, FL 33463

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

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

SIGNATURE: JEAN ROBERT NOCENT

P

07/28/2009

Electronic Signature of Signing Officer or Director

Date