

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000008228

FILED  
Mar 13, 2012  
Secretary of State

**Entity Name:** CARIBBEAN VISION MINISTRIES, INC.

**Current Principal Place of Business:**

323 KELLY STREET  
PANAMA CITY BEACH, FL 32413

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 18317  
PANAMA CITY BEACH, FL 324178317

**New Mailing Address:**

FEI Number: 27-0848858

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

DAVIS, CHARLES R  
323 KELLY STREET  
PANAMA CITY BEACH, FL 32413 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: DP  
Name: DAVIS, CHARLES R  
Address: 323 KELLY STREET  
City-St-Zip: PANAMA CITY BEACH, FL 32413 US

Title: D  
Name: RAGOONATH, ANCIL  
Address: 19914 VILLA CREEK DRIVE APT 103  
City-St-Zip: ORLANDO, FL 32821 US

Title: DV  
Name: JOSEPH, ELYSEE  
Address: 4850 STATE ROAD 7, G120  
City-St-Zip: LAUDERDALE LAKES, FL 33309 US

Title: DTS  
Name: ANDRE, VANCE  
Address: 5450 E FORT KING STREET  
City-St-Zip: OCALA, FL 34470 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: CHARLES R DAVIS

DP

03/13/2012

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

\_\_\_\_\_  
Date