

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000009600

**Entity Name:** CHRISTIAN FAITH MINISTRY, INC.

**Current Principal Place of Business:**

8712 BUSCH OAKS STREET  
TAMPA, FL 33617

**Current Mailing Address:**

907 E. CHILKOOT AVENUE  
TAMPA, FL 33612

**FEI Number: 43-1988943**

**Certificate of Status Desired: No**

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

AUGUSTIN, VALENTIN  
8712 BUSH OAKS ST  
TAMPA, FL 33617 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name AUGUSTIN, VALENTIN  
Address 8712 BUSCH OAKS ST  
City-State-Zip: TAMPA FL 33617

Title T  
Name DIEUDONNE, SASSIFIE  
Address 11725 N. 17 STREET # 208  
City-State-Zip: TAMPA FL 33612

Title D  
Name NERY, DORVILIEN  
Address 3216 E. EMMA STREET  
City-State-Zip: TAMPA FL 33610

Title S  
Name AUGUSTIN, KATHERINE LUCIE  
Address 8712 BUSCH OAKS ST  
City-State-Zip: TAMPA FL 33617

Title D  
Name JOSEPH, ELIPHETE  
Address 6310 N.22TH STREET  
City-State-Zip: TAMPA FL 33612

Title DEACONESS  
Name AUGUSTIN, DELUCIE ALMANORD  
Address 8712 BUSCH OAKS ST.  
City-State-Zip: TAMPA FL 33617

*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: VALENTIN AUGUSTIN**

**PASTOR**

**04/04/2018**

Electronic Signature of Signing Officer/Director Detail

Date