

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000008228

Entity Name: CARIBBEAN VISION MINISTRIES, INC.

Current Principal Place of Business:

319 WEST COUNTY ROAD 61
TIFFIN, OH 44883

Current Mailing Address:

319 WEST COUNTY ROAD 61
TIFFIN, OH 44883 US

FEI Number: 27-0848858

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CARDICHON, DUMONT
1021 NORTHEAST 35TH STREET
OAKLAND PARK, FL 33334 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: DUMONT CARDICHON

02/17/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name STACY, DAVID L
Address 319 WEST COUNTY ROAD 61
City-State-Zip: TIFFIN OH 44883

Title D, SECRETARY
Name CARDICHON, DUMONT
Address 275 NE 40TH STREET
City-State-Zip: OAKLAND PARK FL 33334

Title D, VP
Name JOSEPH, ELYSEE
Address 4211 NW 41ST STREET #104
City-State-Zip: LAUDERDALE LAKES FL 33319

Title D, TREASURER
Name LUTZ, STEPHEN
Address 2161 N PENRYN ROAD
City-State-Zip: MANHEIM PA 17545-9537

Title DIRECTOR
Name DABIDEEN, ROGER
Address LP6
 HYDRAULIC ROAD
City-State-Zip: KELLY VILLAGE CARONI TRINIDAD,
 WI

Title DIRECTOR
Name CHERRY, RYAN DR.
Address 6855 WELLBAUM ROAD
City-State-Zip: BROOKVILLE OH 45309

Title DIRECTOR
Name ENGLAND, SCOTT
Address 850 N STATE ROUTE 18
City-State-Zip: REPUBLIC OH 44867

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: DAVID L STACY

PRESIDENT

02/17/2021

Electronic Signature of Signing Officer/Director Detail

Date