I hereby certify that the information indicated on this report or supplemental report is true and accurate oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execut above, or on an attachment with all other like empowered.		
SIGNATURE: JANE CARROLL	PRESIDENT	03/01/2014

SIGNATURE: JANE CARROLL

Electronic Signature of Signing Officer/Director Detail

Offic Title Name Addre City-S

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.

Electronic Signature of Registered Agent

SIGNATURE:

Officer/Director Detail :				
Title	CP	Title	VC	
Name	CARROLL, JANE	Name	ZALUD, JESSICA	
Address	353 BOWMAN TERRACE	Address	351 BOWMAN TERRACE	
City-State-Zip:	PORT CHARLOTTE FL 33953	City-State-Zip:	PORT CHARLOTTE FL 33953	
Title	D	Title	DT	
Name	MARSHMAN, JONATHAN	Name	BENEPE, BARBARA	
Address	26320 RAMPART BLVD, APT C	Address	602 MOUNTAIN SHADOWS BLVD	
City-State-Zip:	PUNTA GORDA FL 33983	City-State-Zip:	SHERIDAN WY 82801	

Entity Name: CHURCHES WITH A VISION, INC

Current Principal Place of Business:

Current Mailing Address:

353 BOWMAN TERRACE PORT CHARLOTTE, FL 33953

353 BOWMAN TERRACE PORT CHARLOTTE, FL 33953

FEI Number: 83-0251385

Name and Address of Current Registered Agent:

MARSHMAN, JONATHAN 26320 RAMPART BLVD PUNTA GORDA, FL 33983 US

FILED Mar 01, 2014 Secretary of State CC5501719849

Date

Certificate of Status Desired: No

Date