

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2007 8:00 am
Secretary of State

04-18-2007 90156 001 ****61.25

DOCUMENT # N00000000647

1. Entity Name
CHRIST'S MESSENGERS IN ACTION, INC.



Principal Place of Business
**4236 FOREST HILL BLVD.
W. PALM BEACH, FL 33406**

Mailing Address
**4236 FOREST HILL BLVD.
W. PALM BEACH, FL 33406**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04152007 Chg-NP CR2E037 (12/06)

4. FEI Number
65-1023448

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**PIERRILUS, JESUMOND
4236 FOREST HILL BLVD.
W. PALM BEACH, FL 33406**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee Is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **PIERRILUS, JESUMOND REV**
STREET ADDRESS **4236 FOREST HILL BLVD**
CITY-ST-ZIP **WEST PALM BEACH, FL 33406**

TITLE **D** ☐ Delete
NAME **DESTIN, JOSEPH REV.**
STREET ADDRESS **433 BOLOSSE 4TH AVENUE**
CITY-ST-ZIP **PORT-AU-PRINCE, HAITI,**

TITLE **D** ☒ Delete
NAME **LEMONS, ANN**
STREET ADDRESS **2783 DUDLEY DR.E**
CITY-ST-ZIP **WEST PALM BEACH, FL 33415**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Change ☒ Addition
NAME **JOSEPH W. JULMEUS**
STREET ADDRESS **419 GREENWOOD AVENUE**
CITY-ST-ZIP **LEHIGH ACRES, FL 33972**

TITLE **T/D** ☐ Change ☒ Addition
NAME **WILADINE PIERRILUS**
STREET ADDRESS **4236 FOREST HILL BLVD**
CITY-ST-ZIP **WEST PALM BEACH, FL 33406**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-18-07
Date

965-7363
Daytime Phone #