

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006410

FILED  
Feb 20, 2012  
Secretary of State

**Entity Name:** CHURCH CELESTIAL MISSION, INC.

**Current Principal Place of Business:**

2012 N. TAMPANIA AVE.  
TAMPA, FL 33607

**New Principal Place of Business:**

**Current Mailing Address:**

2012 N. TAMPANIA AVE.  
TAMPA, FL 33607

**New Mailing Address:**

**FEI Number:** 59-3642927

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SALAS, JUAN R  
8851 BARCIN CIRCLE  
RIVERVIEW, FL 33569 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: P  
Name: SALAS, JUAN R  
Address: 7408 12TH STREET S  
City-St-Zip: TAMPA, FL 33619

Title: VP  
Name: SALAS, LETICIA  
Address: 7408 12TH STREET S  
City-St-Zip: TAMPA, FL 33619

Title: T  
Name: NEGRON, EVELYN  
Address: 8847 BARCIN CIRCLE  
City-St-Zip: RIVERVIEW, FL 33569

Title: S  
Name: VELEZ, SARAI  
Address: 11534 LAMPLIGHTER LN.  
City-St-Zip: TAMPA, FL 33637

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:** EVELYN NEGRON

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02/20/2012

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

\_\_\_\_\_  
Date