

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 05, 2005 8:00 am**  
**Secretary of State**

04-05-2005 90044 003 \*\*\*\*61.25

**DOCUMENT # N01000001713**

1. Entity Name

CHRISTIAN LIFE MINISTRIES INTERNATIONAL, INC.



Principal Place of Business

2445 TESORO CT  
KISSIMMEE FL 34744

Mailing Address

2445 TESORO CT  
KISSIMMEE FL 34744

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/04)

4. FEI Number

59-3706190

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CHRISTIAN, STEVE  
2445 TESORO CT  
KISSIMMEE FL 34744

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

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2005**

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 PD ☐ Delete  
NAME CHRISTIAN, STEVE  
STREET ADDRESS 2445 TESORO CT  
CITY-ST-ZIP KISSIMMEE FL 34744

TITLE VD ☐ Delete  
NAME CHRISTIAN, JOAN  
STREET ADDRESS 2445 TESORO CT  
CITY-ST-ZIP KISSIMMEE FL 34744

TITLE SD ☐ Delete  
NAME NELSON, INGRID  
STREET ADDRESS 3437 FOX CROSSING DRIVE  
CITY-ST-ZIP KISSIMMEE FL 34741

TITLE ASD ☐ Delete  
NAME LEYSATH, KIM  
STREET ADDRESS 1877 ATTUCKS AVE  
CITY-ST-ZIP ORLANDO FL 32811

TITLE D ☒ Delete  
NAME RUIZ, IRMA  
STREET ADDRESS 2441 TIMOTHY LN  
CITY-ST-ZIP KISSIMMEE FL 34744

TITLE ☐ Delete  
NAME ~~CHRISTIAN, STEVE~~  
STREET ADDRESS ~~2445 TESORO CT~~  
CITY-ST-ZIP ~~KISSIMMEE FL 34744~~

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Change ☒ Addition  
NAME Eugenia Perez  
STREET ADDRESS 2225 Orange Blvd  
CITY-ST-ZIP Kissimmee, Fla 34741

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

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 exemption stated in Section 119.07(3)(i), 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:** *Joan E Christian* **JOAN E Christian**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/30/05 407344-3253

Date Daytime Phone #