

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

04-02-2004 90013 035 ***61.25
N02000005157

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
00444360



MOORE CR2E037 (11/03)

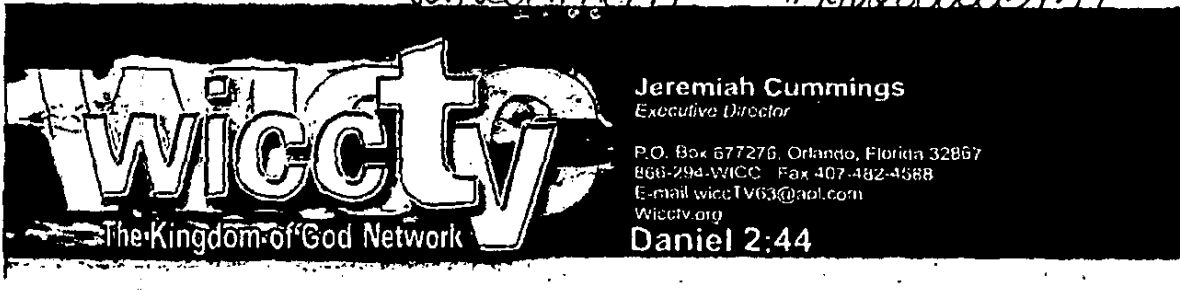
DOCUMENT # N02000005157					
1. Entity Name INTERNATIONAL CAMPAIGN FOR CHRIST, INC.					
Principal Place of Business P.O. BOX 677276 ORLANDO FL 32867			Mailing Address 9151 SHADOW BROOK ORLANDO FL 32825		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 01-0729175	
5. Certificate of Status Desired ☐				Applied For Not Applicable	
8. Name and Address of Current Registered Agent CUMMINGS, JEREMIAH 9151 SHADOW BROOK TRAIL ORLANDO FL 32825				7. Name and Address of New Registered Agent	
Name				Street Address (P.O. Box Number is Not Acceptable)	
City				Zip Code	
6. 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 is applicable (NOTE: Registered Agent signature required when resigning)					
FILE NOW: FEE IS \$61.25 Due By May 1, 2004		8. 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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	TITLE	NAME
	CUMMINGS, JEREMIAH	9151 SHADOWBROOK	ORLANDO FL 32825		
	CHUMLEY, SILAS	13908 MATTAPONY DR	WOODBIDGE FL 22193		
	FRAZIER, JOE N	7815 COLORADO SPRINGS	SPRINGFIELD VA 22153		
	HANANIAH MUHAMMAD	1405 MILL VALLEY SQ. #115	FT WORTH TX 76120		
	NANCY CUMMINGS	9151 SHADOW BROOK TRAIL	ORLANDO FL 32825		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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 incorporator 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 or without power of attorney.					
SIGNATURE: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

Attachment

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Office of Officers

Hanarah Muhammad Treasurer (TS)

Nancy Cummings Vice President (VP)

Jeremiah Cummings President