2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2009
Secretary of State

DOCUMENT# N02000009664

Entity Name: CHRISTIAN COMMUNITY MISSIONS, INC.

Current Principal Place of Business:

1052 HWY 92
W. ABURNDALE, FL 33823

New Principal Place of Business:

Current Mailing Address:

1052 HWY 92
W. ABURNDALE, FL 33823

New Mailing Address:

FEI Number: 48-1301479 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

KOLADES, ALLEN J
1052 HWY 92
W. ABURNDALE, FL 33823 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: D ( ) Delete
Name: KOLADES, ALLEN J REV.
Address: PO BOX 721
City-St-Zip: AUBERNDALE, FL 33823

Title: D ( ) Delete
Name: NYGAARD, BONNIE
Address: 72 LAS PALMS DRIVE
City-St-Zip: AUBURNDALE, FL 33823

Title: D ( ) Delete
Name: GIROUARD, ALFRED
Address: 119 S. EASTSIDE DR.
City-St-Zip: LAKESIDE, FL 33801

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ALLEN KOLADES REV 04/13/2009

Electronic Signature of Signing Officer or Director — Date