

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004060

FILED  
May 01, 2009  
Secretary of State

Entity Name: CHRIST ASSEMBLY, INC.

**Current Principal Place of Business:**

9974 NANDINA STREET  
MIRAMAR, FL 33025 US

**New Principal Place of Business:**

**Current Mailing Address:**

9974 NANDINA STREET  
MIRAMAR, FL 33025 US

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

DORSAINVAL, EDELYNE  
2011 NE 2ND TERRACE  
POMPANO BEACH, FL 33060 US

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 ( ) Delete  
Name: DORSAINVAL, WIDMARCK  
Address: 9974 NANDINA STREET  
City-St-Zip: MIRAMAR, FL 33025 US

Title: VP ( ) Delete  
Name: PIERRE, DONALD  
Address: 4030 NE 4TH TER  
City-St-Zip: POMPANNO BEACH, FL 33064 US

Title: ST ( ) Delete  
Name: MASSILLON, ROSE MARJORIE  
Address: 810 SW 63RD WAY  
City-St-Zip: NORTH LAUDERDALE, FL 33068 US

**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: WIDMARCK DORSAINVAL

P

05/01/2009

Electronic Signature of Signing Officer or Director

Date