

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 22, 2007 8:00 am
Secretary of State

03-22-2007 90015 011 ****70.00

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1. Entity Name
MARK CHRISTIAN MINISTRIES OF JESUS CHRIST, INC.



Principal Place of Business
3912 LEE BLVD
LEHIGH ACRES, FL 33971

Mailing Address
4508 6TH ST. WEST
LEHIGH ACRES, FL 33971

60027490



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

03192007 Chg-NP CR2E037 (12/06)

4. FEI Number
27-0079432

Applied For
Not Applicable

Zip

Country

Zip

Country

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

MARK, LEON
4508 6TH ST. WEST
LEHIGH ACRES, FL 33971

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

Filing Fee is \$61.25
Due by May 1, 2007

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	<input type="checkbox"/> Delete
NAME	MARK, LEON	
STREET ADDRESS	4508 6TH ST. WEST	
CITY-ST-ZIP	LEHIGH ACRES, FL 33971	
TITLE	EVD	<input type="checkbox"/> Delete
NAME	MARK, TOWANNA D	
STREET ADDRESS	4508 6TH ST. WEST	
CITY-ST-ZIP	LEHIGH ACRES, FL 33971	
TITLE	AAD	<input checked="" type="checkbox"/> Delete
NAME	BOSTICK, WONDER	
STREET ADDRESS	1619 PLUMOSA AVE	
CITY-ST-ZIP	LEHIGH ACRES, FL 33936	
TITLE	S	<input type="checkbox"/> Delete
NAME	SCOTT, LATOYA R	
STREET ADDRESS	4938 GARY DR.	
CITY-ST-ZIP	FORT MYERS, FL 33905	
TITLE	TD	<input type="checkbox"/> Delete
NAME	SHIRLEY, MCDONALD M	
STREET ADDRESS	4938 GARY DR	
CITY-ST-ZIP	FORT MYERS, FL 33905	
TITLE	D	<input type="checkbox"/> Delete
NAME	MARK, THELMA M	
STREET ADDRESS	4938 GARY DR	
CITY-ST-ZIP	FT. MYERS, FL 33905	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	Director of Food Service	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Gloria Davis	
STREET ADDRESS	3028 Willin St	
CITY-ST-ZIP	Fort Myers, FL 33916	
TITLE	Director of Youth	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Erick Scott Sr	
STREET ADDRESS	4438 Gary Dr	
CITY-ST-ZIP	Fort Myers, FL 33905	
TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Orther Anderson Sr	
STREET ADDRESS	1524 Medford Place	
CITY-ST-ZIP	Lehigh Acres, FL 33936	
TITLE	Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ADA F. WPPS	
STREET ADDRESS	2111 Dupree St.	
CITY-ST-ZIP	Fort Myers, FL 33916	
TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Alecha McKay	
STREET ADDRESS	3610 Pine oak Cir Apt. 104	
CITY-ST-ZIP	Fort Myers, FL 33916	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

T. Mark
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Towanna Mark

3/20/07

Date

239-368-2828

Daytime Phone #