

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002487

FILED
May 01, 2009
Secretary of State

Entity Name: CHRIST GLOBAL MINISTRIES INTERNATIONAL INC.

Current Principal Place of Business:

10549 NORTH FLORIDA AVENUE, SUITE G
TAMPA, FL 33613 US

New Principal Place of Business:

10549 NORTH FLORIDA AVENUE
SUITE # G
TAMPA, FL 33612 US

Current Mailing Address:

10549 NORTH FLORIDA AVENUE, SUITE G
TAMPA, FL 33613 US

New Mailing Address:

10549 NORTH FLORIDA AVENUE
SUITE # G
TAMPA, FL 33612 US

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:

KANYINDA, MARTINE N D
3014 WEST MEADOWS STREET
TAMPA, FL 33611 US

Name and Address of New Registered Agent:

KANYINDA, MARTINE N D
9105 LOST MILL DR
LAND O LAKES, FL 34638 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: MARTINE KANYINDA

05/01/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KANYINDA, TUMBA APOSTLE
Address: 3013 W. MEADOWS STREET
City-St-Zip: TAMPA, FL 33611 US

Title: A () Delete
Name: KANYINDA, MARTINE N A
Address: 3014 WEST MEADOWS STREET
City-St-Zip: TAMPA, FL 33611

Title: A () Delete
Name: WHITE, SAMUEL MINISTE
Address: 3014 WEST MEADOWS STREET
City-St-Zip: TAMPA, FL 33611

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KANYINDA, TUMBA APOSTLE
Address: 9105 LOST MILL DR
City-St-Zip: LAND O LAKES, FL 34638 US

Title: A (X) Change () Addition
Name: KANYINDA, MARTINE N A
Address: 9105 LOST MILL DR
City-St-Zip: LAD LAKES, FL 34638

Title: A (X) Change () Addition
Name: WHITE, SAMUEL MINISTE
Address: 2505 18TH E. AVE
City-St-Zip: TAMPA, FL 33605

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: MARTINE KANYINDA

A

05/01/2009

Electronic Signature of Signing Officer or Director

Date