

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002487

FILED  
Apr 05, 2011  
Secretary of State

**Entity Name:** CHRIST GLOBAL MINISTRIES INTERNATIONAL INC.

**Current Principal Place of Business:**

9212 LOST MILL DRIVE  
LAND O LAKES, FL 34638 US

**New Principal Place of Business:**

**Current Mailing Address:**

9212 LOS MILL DR.  
LAND O LAKES, FL 34638 US

**New Mailing Address:**

**FEI Number:** 27-3393288

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

KANYINDA, MARTINE N D  
9212 LOST MILL DR  
LAND O LAKES, FL 34638 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: P  
Name: KANYINDA, TUMBA APOSTLE  
Address: 9212 LOST MILL DR  
City-St-Zip: LAND O LAKES, FL 34638 US

Title: A  
Name: KANYINDA, MARTINE PASTOR  
Address: 9212 LOST MILL DR  
City-St-Zip: LAD LAKES, FL 34638

Title: O  
Name: TIM, CHILES APOSTLE  
Address: 12016 N. NEBRASKA AVE  
City-St-Zip: TAMPA, FL 33612

Title: O  
Name: EMMANUEL, OPOKU APOSTLE  
Address: 9212 LOST MILL DR.  
City-St-Zip: LAND O LAKES, FL 34638

Title: O  
Name: KANYINDA, SHIKA GOYA  
Address: 9212 LOST MILL DR.  
City-St-Zip: LAND O LAKES, FL 34638

I hereby 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 all other like empowered.

**SIGNATURE:** MARTINE KANYINDA

ADMI

04/05/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date