

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 17, 2005 8:00 am
Secretary of State

03-17-2005 90018 033 ****61.25

DOCUMENT # N04000003316

1. Entity Name

COMMUNION MINISTRIES INTERNATIONAL, INC.



Principal Place of Business

1009 AVE I
FORT PIERCE FL 34950

Mailing Address

P.O. BOX 554
OCOE FL 34761

2. Principal Place of Business

5553 Century 21 Blvd.
#256
Orlando, FL.
32807 N. America

3. Mailing Address

P.O. Box 554
Suite, Apt. #, etc.

City & State

Ocoee, FL.

Zip

34761

Country

N. America

4. FEI Number

55-0863554

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ALLEN, JOHN JR.
1009 AVE I
FORT PIERCE FL 34950

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

5553 Century 21 Blvd. #256

City

Orlando

FL

Zip Code

32807

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

John Allen, Jr.

Signature, typed or printed name of registered agent and title if applicable

[Signature]

(NOTE: Registered Agent signature required when reinstating)

3/11/05

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2005

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	D	Delete
NAME	ALLEN, JOHN JR.	
STREET ADDRESS	1009 AVE I	
CITY-ST-ZIP	FORT PIERCE FL 34950	
TITLE	D	Delete
NAME	ALLEN, ERICA E	
STREET ADDRESS	1009 AVE I	
CITY-ST-ZIP	FORT PIERCE FL 34950	
TITLE	D	Delete
NAME	REEVES, BETTE J	
STREET ADDRESS	921 BARNABY ST., SE	
CITY-ST-ZIP	WASHINGTON DC 20032	
TITLE		Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	Change	Addition
NAME	5553 Century 21 Blvd. #256	
STREET ADDRESS	Orlando, FL. 32807	
CITY-ST-ZIP		
TITLE	Change	Addition
NAME	5553 Century 21 Blvd. #256	
STREET ADDRESS	Orlando, FL. 32807	
CITY-ST-ZIP		
TITLE	Change	Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Change	Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Change	Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

[Signature]

John Allen Jr.

3/11/05

Date

407-671-9431

Daytime Phone