

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010619

FILED
May 01, 2007
Secretary of State

Entity Name: CHRISTIAN COMMUNITY FAITH MINISTRIES, INC

Current Principal Place of Business:

2052 NW 49 AVE.
LAUDERHILL, FL 33313

New Principal Place of Business:

Current Mailing Address:

2052 NW 49 AVE.
LAUDERHILL, FL 33313

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**
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:

PORTER, CLIVE A. BISHOP
12344 NW 26TH AVE.
CORAL SPRINGS, FL 33065 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: DP () Delete
Name: PORTER, CLIVE A. SR.
Address: 12344 NW 26 AVE.
City-St-Zip: CORAL SPRINGS, FL 33065

Title: D () Delete
Name: WALTERS, SANDRA
Address: 3860 NW 102 AVE.
City-St-Zip: CORAL SPRINGS, FL 33065

Title: O () Delete
Name: LEWIS, RAYMOND
Address: 4115 NW 48 AVE.
City-St-Zip: LAUDERDALE LAKES, FL 33319

Title: O () Delete
Name: SMITH, THELMORE
Address: 2431 NW 98 AVE.
City-St-Zip: SUNRISE, FL 33322

Title: O () Delete
Name: SHAW, CHARLES
Address: 7800 SUNSET STRIP
City-St-Zip: SUNRISE, FL 33322

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:

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: CLIVE A PORTER

BISH

05/01/2007

Electronic Signature of Signing Officer or Director

Date