

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000010709

**FILED**  
**Mar 20, 2012**  
**Secretary of State**

**Entity Name:** MISSIONARY CHURCH OF CHRIST, INC.

**Current Principal Place of Business:**

1390 SW DORCHESTER ST  
PORT ST LUCIE, FL 34983 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 8255  
PORT ST LUCIE, FL 34984

**New Mailing Address:**

**FEI Number:** 27-0790250

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CORTES, ELIASIB  
1390 SW DORCHESTER ST  
PORT ST LUCIE, FL 34983 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:** PVS  
**Name:** CORTES, ELIASIB  
**Address:** 161 SW GRIMALDO TER  
**City-St-Zip:** PORT ST LUCIE, FL 34985

**Title:** T  
**Name:** ARES, ORLANDO  
**Address:** 548 SW CRAWFISH DR  
**City-St-Zip:** PORT ST LUCIE, FL 34953

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:** ELIASIB CORTES

PAST

03/20/2012

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

\_\_\_\_\_  
Date