2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2009
Secretary of State

DOCUMENT# N08000000425

Entity Name: CHRIST'S COMMUNITY INTERNATIONAL MINISTRIES, INC

Current Principal Place of Business:

171 NW 145 STREET
NORTH MIAMI, FL 33168

New Principal Place of Business:

Current Mailing Address:

171 NW 145 STREET
NORTH MIAMI, FL 33168

New Mailing Address:

FEI Number: 68-0669553 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PIERRE, JACQUES E REV. DR
171 NW 145 STREET
NORTH MIAMI, FL 33023 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 ( ) Delete
Name: PIERRE, JACQUES E REV. DR
Address: 171 NW 145 STREET
City-St-Zip: NORTH MIAMI, FL 33168

Title: VP ( ) Delete
Name: JEAN-PIERRE, RUTH P
Address: 5210 SW 23RD TER
City-St-Zip: FORT LAUDERDALE, FL 33112

Title: T ( ) Delete
Name: SHIELDS, AUDREY P
Address: 2018 NW 14TH AVE
City-St-Zip: MIAMI, FL 33169

Title: S ( ) Delete
Name: DELISMA-PIERRE, MYRIAM P
Address: 171 NW 145 STREET
City-St-Zip: NORTH MIAMI, FL 33168

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change ( ) Addition
Name: SHIELDS, AUDREY P
Address: 20181 NW 14TH AVE
City-St-Zip: MIAMI, FL 33169

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: AUDREY P. SHIELDS T 01/31/2009

Electronic Signature of Signing Officer or Director — Date