2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2011
Secretary of State

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Entity Name: CHRIST AMBASSADORS FAMILY MINISTRY, INC.

Current Principal Place of Business:

7448 PARKSIDE LN
MARGATE, FL 33063

New Principal Place of Business:

10462 W. ATLANTIC BLVD.
CORAL SPRINGS, FL 33071

Current Mailing Address:

PO BOX 772277
CORAL SPRINGS, FL 33077

New Mailing Address:

FEI Number: 27-1485410 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SMITH, PAMELA DENISE
7448 PARKSIDE LN
MARGATE, FL 33063 US

Name and Address of New Registered Agent:

SMITH, PAMELA D
7448 PARKSIDE LN
MARGATE, FL 33063 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: PAMELA D. SMITH 04/30/2011
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD
Name: SMITH, PAMELA D
Address: 7448 PARKSIDE LN
City-St-Zip: MARGATE, FL 33063

Title: SD
Name: FORDE, IANTHE
Address: 523 NE 2ND AVE #2
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: D
Name: SMITH, REGINALD L JR
Address: 7448 PARKSIDE LN
City-St-Zip: MARGATE, FL 33063

Title: D
Name: LOVEJOY, ALEXIS
Address: 152 NAOMI LANE
City-St-Zip: CAIRO, GA 39828

Title: D
Name: LADSON, KATRINA
Address: PO BOX 15285
City-St-Zip: PLANTATION, FL 33318

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: PAMELA D. SMITH PD 04/30/2011
Electronic Signature of Signing Officer or Director Date