

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N27573

**FILED**  
**Mar 09, 2011**  
**Secretary of State**

**Entity Name:** CHARLES CARRIN MINISTRIES, INC.

**Current Principal Place of Business:**

P.O. DRAWER 800  
BOYNTON BEACH, FL 33425 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. DRAWER 800  
BOYNTON BEACH, FL 33425 US

**New Mailing Address:**

**FEI Number:** 65-0066398

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEBEDEKER, MICHAEL D.  
711 NORTH FLAGLER DRIVE  
WEST PALM BEACH, FL 33401 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:** PD  
**Name:** CARRIN, CHARLES C.  
**Address:** 1392 SW 17 AVE  
**City-St-Zip:** BOYNTON BEACH, FL 33426

**Title:** VD  
**Name:** MCGUIRE, CECILE  
**Address:** 7215 BENNETT ROAD  
**City-St-Zip:** CUMMING, GA 30041

**Title:** TD  
**Name:** MORRONGIELLO, ANTHONY  
**Address:** 2601 BARKLEY DR. W.  
**City-St-Zip:** WEST PALM BEACH, FL 33415

**Title:** SD  
**Name:** MCMICHAEL, KAREN  
**Address:** 1250 S.W. 25 WAY  
**City-St-Zip:** BOYNTON BEACH, FL

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:** KAREN MCMICHAEL

SD

03/09/2011

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

\_\_\_\_\_  
Date