

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41210

FILED  
Mar 08, 2009  
Secretary of State

Entity Name: CHRIST INTERNATIONAL MINISTRIES, INC.

**Current Principal Place of Business:**

<UNUSED>  
NORTH MIAMI, FL 33161 US

**New Principal Place of Business:**

1814 NE MIAMI GARDENS DRIVE  
107  
NORTH MIAMI BEACH, FL 33179 US

**Current Mailing Address:**

1814 NE MIAMI GARDENS DR, 107  
NORTH MIAMI BEACH, FL 33179 US

**New Mailing Address:**

1814 NE MIAMI GARDENS DRIVE  
107  
NORTH MIAMI BEACH, FL 33179 US

FEI Number: 65-0233657      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MORGAN, CHARLES O JR.  
1300 NW 167 ST  
MIAMI, FL 33169 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 ( ) Delete  
Name: FLEMING, DAVID BRANC, H  
Address: 1601 NE 191 ST., #304  
City-St-Zip: MIAMI, FL 33179

Title: TSD ( ) Delete  
Name: FLEMING, CAROL JEAN, M.  
Address: 1601 NE 191 ST., #304  
City-St-Zip: MIAMI, FL 33179

Title: D ( ) Delete  
Name: LAURORE, JOEL,  
Address: 11601 SOUTH 69TH EAST AVENUE  
City-St-Zip: BIXBY, OK 74008

**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:

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: DAVID B. FLEMING

PD

03/08/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date