

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45118

FILED  
Mar 14, 2008  
Secretary of State

**Entity Name:** CHRISTIAN INTERNATIONAL NETWORK OF PROPHETIC MINISTRIES, INC.

**Current Principal Place of Business:**

177 APOSTLES WAY  
SANTA ROSA BEACH, FL 32459 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 9000  
SANTA ROSA BEACH, FL 32459 US

**New Mailing Address:**

**FEI Number:** 59-3096327      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

HAMON, TIMOTHY T DR  
326 HAMON AVENUE  
SANTA ROSA BEACH, FL 32459 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: HAMON, BILL  
Address: 379 HAMON AVENUE  
City-St-Zip: SANTA ROSA BEACH, FL

Title: D ( ) Delete  
Name: WALTERS, LEON  
Address: 2377 EAST 250 SOUTH  
City-St-Zip: VERSAILLES, IN 47042

Title: D ( ) Delete  
Name: HAMON, EVELYN  
Address: 410 MCKENNY RD  
City-St-Zip: SANTA ROSA BEACH, FL

Title: VPD ( ) Delete  
Name: DAVIS, JIM  
Address: 4101 TATES CREEK DRIVE PMB 334  
City-St-Zip: LEXINGTON, KY 40517

Title: S ( ) Delete  
Name: MILLER, SHERILYN  
Address: 174 WATER COLOR WAY #352  
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: T ( ) Delete  
Name: HAMON, TIM  
Address: 326 HAMON AVENUE  
City-St-Zip: SANTA ROSA BEACH, FL 32459

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VPD (X) Change ( ) Addition  
Name: WALTERS, LEON  
Address: 2377 EAST 250 SOUTH  
City-St-Zip: VERSAILLES, IN 47042

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

Title: D (X) Change ( ) Addition  
Name: LARRY, BIZETTE  
Address: 7502 DON BUDGE AVENUE  
City-St-Zip: BABATON ROUGE, LA 70810

Title: SD (X) Change ( ) Addition  
Name: MILLER, SHERILYN  
Address: 293 HAMON AVENUE  
City-St-Zip: SANTA ROSA BEACH, FL 32459

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: SHERILYN MILLER

S

03/14/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date