

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000570

FILED
Feb 03, 2004
Secretary of State**Entity Name:** COMMUNITY CARE-GIVING MINISTRY, INC.**Current Principal Place of Business:**1128 ROYAL PALM BCH BLVD
PMB 296
ROYAL PALM BEACH, FL 33411**New Principal Place of Business:**1128 ROYAL PALM BCH BLVD
PMB 296
ROYAL PALM BEACH, FL 33411 US**Current Mailing Address:**1128 ROYAL PALM BCH BLVD
PMB 296
ROYAL PALM BEACH, FL 33411 US**New Mailing Address:****FEI Number:** 65-0564305 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ROGERS, ERSKINE C III
1803 AUSTRALIAN AVENUE S.
SUITE G
WEST PALM BEACH, FL 334096459 US**Name and Address of New Registered Agent:**ROGERS, ERSKINE C III
4 HARVARD CIRCLE
WEST PALM BEACH, FL 33409 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: ON FILE

02/03/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** DFO () Delete
Name: VAN DALEN, KAREN L
Address: 12 MOHAWK DR.
City-St-Zip: ROYAL PALM BEACH, FL 33411**Title:** DADF () Delete
Name: HOLMES, MILLIE M
Address: 11852 54TH STREET NORTH
City-St-Zip: ROYAL PALM BCH, FL 33411**Title:** DED () Delete
Name: VAN DALEN, DR. DIRK J
Address: 12 MOHAWK DR
City-St-Zip: ROYAL PALM BCH, FL 33411**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 for the exemption stated in Section 119.07(3)(i), 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: D. J. VAN DALEN

CO-P

02/03/2004

Electronic Signature of Signing Officer or Director

Date