## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 16, 2007 8:00 am Secretary of State

DOCUMENT # N9500000570  1. Entity Name COMMUNITY CARE-GIVING MINISTRY, INC.					04-16-20	007 90079 039 ****61.25	
Principal Place of Business Mailing Address 11852 54TH ST N 1128 ROYAL PALM BCH ROYAL PALM BEACH, FL 33411 US PMB 296 ROYAL PALM BEACH, FL							
2. Principal P	Place of Business - No P.O. Box #	3. Mailing Address				1881  <b>  1881    1881    1881    1881    1881    1881 </b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03152007	Chg-NP	CR2E037 (12/06)	
City & State		City & State		4. FEI Number 65-0564	305	Applied For Not Applicable	
Zip	Country	<i>Z</i> ip	Country	5. Certificate of	of Status Desire	sd S8.75 Additional Fee Required	
	6. Name and Address of Current	Registered Agent		7. Name and	Address of No	w Registered Agent	
ROGERS, ERSKINE C III			Name	Name			
4 HARVARD CIRCLE WEST PALM BEACH, FL 33409			Street Ad	Street Address (P.O. Box Number is Not Acceptable)			
_	•						
			City	FL Zip Code			
	named entity submits this statement folions of registered agent.	or the purpose of changing its	registered office or	registered agent, or both	, in the State o	f Florida. I am familiar with, and accept	
l							
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE	: Registered Agent signat.	ire required when reinstating)		DATE	
SIGNATURE		T	paign Financing	\$5.00 May Be Added to Fees	, ,	Make check payable to florida Department of State	
SIGNATURE	Filing Fee is \$61.25 Due by May 1, 2007  OFFICERS AND DI	9. Election Cam Trust Fund C	paign Financing	\$5.00 May Be Added to Fees	77.5	Make check payable to Florida Department of State ICERS AND DIRECTORS IN 10	
10.	Filing Fee is \$61.25 Due by May 1, 2007  OFFICERS AND DI	9. Election Cam Trust Fund C	epaign Financing contribution.	\$5.00 May Be Added to Fees ADDITIONS/CHA	NGES TO OFF	Make check payable to Florida Department of State  ICERS AND DIRECTORS IN 10  Change Addition	
10. TITLE NAME	Filing Fee is \$61.25 Due by May 1, 2007  OFFICERS AND DI VAN DALEN, KAREN L	9. Election Carr Trust Fund C	npaign Financing contribution. 11. TILE NAME	\$5.00 May Be Added to Fees ADDITIONS/CHA	NGES TO OFF	Make check payable to Florida Department of State ICERS AND DIRECTORS IN 10	
10.	Filing Fee is \$61.25 Due by May 1, 2007  OFFICERS AND DI	9. Election Carr Trust Fund C RECTORS	epaign Financing contribution.	\$5.00 May Be Added to Fees	NGES TO OFF	Make check payable to Florida Department of State  ICERS AND DIRECTORS IN 10  Change Addition	
10. TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2007  OFFICERS AND DI PD VAN DALEN, KAREN L +1852 54TH ST N* ROYAL PALM BEACH, FL 3341  VTD	9. Election Carr Trust Fund C RECTORS	npaign Financing contribution.  11.  TITLE  NAME  STREET ADDRESS	\$5.00 May Be Added to Fees ADDITIONS/CHA	NGES TO OFF	Make check payable to Florida Department of State  ICERS AND DIRECTORS IN 10  Change Addition	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Filing Fee is \$61.25 Due by May 1, 2007  OFFICERS AND DI  PD  VAN DALEN, KAREN L  11852 54TH ST N*  ROYAL PALM BEACH, FL 3341  VTD  HOLMES, MILLIE M	9. Election Carr Trust Fund C RECTORS  Delete	npaign Financing contribution.  11.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	\$5.00 May Be Added to Fees ADDITIONS/CHA	NGES TO OFF	Make check payable to Florida Department of State ICERS AND DIRECTORS IN 10 Change Addition address only	
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10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Filing Fee is \$61.25 Due by May 1, 2007  OFFICERS AND DI  PD VAN DALEN, KAREN L 11852 54TH ST N* ROYAL PALM BEACH, FL 3341  VTD HOLMES, MILLIE M 11852 54TH STREET NORTH ROYAL PALM BCH, FL 33411  SD HOLMES, AIMEE J	9. Election Carr Trust Fund C RECTORS  Delete  1	npaign Financing contribution.  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP	\$5.00 May Be Added to Fees ADDITIONS/CHA	NGES TO OFF	Make check payable to Florida Department of State  FICERS AND DIRECTORS IN 10  This change Addition  Change Addition  Addition	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 🚅

Karen L. wan Dalen SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/09/07 (561)541-5574 Date Daytre Prone #