

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jun 09, 2008 8:00 am
Secretary of State

06-09-2008 90001 027 ****72.00

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1. Entity Name

THE CHRISTIAN CHURCH BY FAITH MINISTRIES,
INC.

Principal Place of Business

1001 NW 6TH STREET
POMPANO BEACH FL 33060
US

Mailing Address

1001 NW 6TH STREET
POMPANO BEACH FL 33060
US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0656892

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MOSS, BISHOP PETER F
4970 SW 7 STREET
MARGATE FL 33068

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Peter F Moss

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature and name will be stamped)

5-1-08

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME MOSS, PETER F
STREET ADDRESS 100 NW 6TH ST.
CITY- ST- ZIP POMPANO BEACH FL 33060

TITLE DV ☐ Delete
NAME MOSS, ANALIA F
STREET ADDRESS 100 NW 6TH ST.
CITY- ST- ZIP POMPANO BEACH FL 33060

TITLE SD ☐ Delete
NAME GETRO, DORVIL
STREET ADDRESS 100 NW 6TH ST.
CITY- ST- ZIP POMPANO BEACH FL 33060

TITLE D ☐ Delete
NAME FLEURIGENE, RAMNER
STREET ADDRESS 4970 SW 7 ST
CITY- ST- ZIP MARGATE FL 33068

TITLE D ☒ Delete
NAME RISSORT, JUSTIN
STREET ADDRESS 1001 NW 6 ST
CITY- ST- ZIP POMPANO BEACH FL 33060

TITLE D ☒ Delete
NAME FLEURIDOR, JOSEPH
STREET ADDRESS 1001 NW 6 ST
CITY- ST- ZIP POMPANO BEACH FL 33060

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☒ Change ☒ Addition
NAME *D. ELITES DALGER*
STREET ADDRESS *1001 NW 6 ST*
CITY- ST- ZIP *Pompano Beach FL 33060*

TITLE ☒ Change ☐ Addition
NAME *JULES JEAN Baptiste*
STREET ADDRESS *1001 NW 6 ST*
CITY- ST- ZIP *Pompano Beach FL 33060*

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Peter F Moss PETER MOSS DIR

5-1-08 954 274 4826