

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001576

FILED  
Apr 13, 2009  
Secretary of State

**Entity Name:** THE CHRISTIAN CHURCH BY FAITH MINISTRIES, INC.

**Current Principal Place of Business:**

1001 NW 6TH STREET  
POMPANO BEACH, FL 33060 US

**New Principal Place of Business:**

**Current Mailing Address:**

1001 NW 6TH STREET  
POMPANO BEACH, FL 33060 US

**New Mailing Address:**

**FEI Number:** 65-0656892

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MOSS, BISHOP PETER F  
4970 SW 7 STREET  
MARGATE, FL 33068 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: MOSS, PETER F  
Address: 100 NW 6TH ST.  
City-St-Zip: POMPANO BEACH, FL 33060

Title: DV ( ) Delete  
Name: MOSS, ANALIA F  
Address: 100 NW 6TH ST.  
City-St-Zip: POMPANO BEACH, FL 33060

Title: SD ( ) Delete  
Name: GETRO, DORVIL  
Address: 100 NW 6TH ST.  
City-St-Zip: POMPANO BEACH, FL 33060

Title: D ( ) Delete  
Name: FLEURIGENE, RAMNER  
Address: 4970 SW 7 ST  
City-St-Zip: MARGATE, FL 33068

Title: D ( ) Delete  
Name: DALGER, ELITES  
Address: 1001 NW 6 ST  
City-St-Zip: POMPANO BEACH, FL 33060

Title: D ( ) Delete  
Name: JEAN BAPTISTE, JULES  
Address: 1001 NW 6 ST  
City-St-Zip: POMPANO BEACH, FL 33060

**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:

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: PETER F. MOSS

PD

04/13/2009

Electronic Signature of Signing Officer or Director

Date