

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001740

FILED  
Apr 23, 2012  
Secretary of State

**Entity Name:** CHRISTIAN SUPPORT MINISTRIES, INC.

**Current Principal Place of Business:**

4191 SAN JUAN AVE.  
SUITE 1D  
JACKSONVILLE, FL 32210

**New Principal Place of Business:**

**Current Mailing Address:**

4191 SAN JUAN AVE.  
SUITE 1D  
JACKSONVILLE, FL 32210

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

BUSH, DAVID M  
4191 SAN JUAN AVE.  
1D  
JACKSONVILLE, FL 32210 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: DP  
Name: BUSH, DAVID M  
Address: 7969 LE MANS DRIVE  
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: DVT  
Name: MORRIS, STEVE  
Address: 8336 W HAMDEN ROAD  
City-St-Zip: JACKSONVILLE, FL

Title: DS  
Name: TAYLOR, TIMOTHY L  
Address: 503 PURCELL DR  
City-St-Zip: JACKSONVILLE, FL

I hereby 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 all other like empowered.

SIGNATURE: DAVID M. BUSH

DP

04/23/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date