

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2005 08:00 AM
Secretary of State

DOCUMENT # N96000004705

1. Entity Name
CHRISTIAN MISSION ADONAI INC.



Principal Place of Business
**250 CORY AVE NE
PALM BAY, FL 32907**

Mailing Address
**250 CORY AVE NE
PALM BAY, FL 32907**



02022005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3396391

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**ROMERO, FRANCISCO
250 CORY AVE NE
PALM BAY, FL 32907**

**DO NOT WRITE
IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PASTOR FRANCISCO ROMERO 250 CORY AVE PALM BAY, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT ROMERO, FRANK M 295 WAVECREST AVE NE PALM BAY, FL 32907
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T VALENTIN, SANDRA 295 WAVE CREST AVE NE PALM BAY, FL 32907
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MANZANO, ADA 250 LORY AVE PALM BAY, FL 32507
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ROMERO, JUAN 1063 HOOVER AVE PALM BAY, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MANZANO, LILLIAM 1166 COTTON RD PALM BAY, FL 32907

1100000219083
02/08/05-80013-016 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *Francisco Romero* **Francisco Romero**

2-8-05

821 724 4937

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #