


# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**May 04, 2005 8:00 am**  
**Secretary of State**

05-04-2005 90114 027 \*\*\*\*66.25

<b>DOCUMENT # N98000001348</b> 1. Entity Name <b>MISSIONARY OF CHRIST, INC.</b>					
Principal Place of Business <b>711 SW 12TH COURT DEERFIELD BEACH FL 33441</b>			Mailing Address <b>711 SW 12TH COURT DEERFIELD BEACH FL 33441</b>		
2. Principal Place of Business <b>711 SW 12th COURT</b> Suite, Apt. #, etc. <b>DEERFIELD BCH F</b> City & State <b>FLA</b>			3. Mailing Address Suite, Apt. #, etc. City & State Zip <b>33441</b>		
4. FEI Number <b>65-0841533</b>			Applied For <input type="checkbox"/> Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>			1st MOORE CR2E037 (10/04)		
6. Name and Address of Current Registered Agent <b>DOSTALY, WILNER 545 NW 48TH AVENUE DEERFIELD BEACH FL 33442</b>				7. Name and Address of New Registered Agent Name <b>DOSTALY, WILNER</b> Street Address (P.O. Box Number is Not Acceptable) <b>545 NW 48th AVENUE</b> <b>DEERFIELD BCH</b> City <b>FL</b> Zip Code <b>33442</b>	
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 <i>x Wilner Dostaly</i> <small>Signature, typed or printed name of registered agent and title if applicable</small>		(NOTE: Registered Agent signature required when reinstating) DATE			
<b>FILE NOW: FEE IS \$61.25 Due By May 1, 2005</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		<b>Make Check Payable to Florida Department of State</b>	
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P DOSTALY, WILNER 545 NW 48TH AVE DEERFIELD BEACH FL 33442</b>	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V DIRET, LUCIENNE 1454 SW DEERFIELD BCH DEERFIELD BEACH FL 33442</b>	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>F SAINTCOLS, ROCK 711-SW 12 CT DEERFIELD BEACH FL 33441</b>	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T CALXITE, FRTIZ 6320 SW 9TH PLACE NORTH LAUDERDALE FL 33068</b>	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S CALXITE, ADELIN 6320 SW 9TH PLACE NORTH LAUDERDALE FL 33068</b>	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>C JEAN, JEAN S 1300 SW10TH AVE DEERFIELD BEACH FL 33442</b>	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.					
<b>SIGNATURE: x Wilner Dostaly</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
<small>Date Daytime Phone #</small>					