

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000004971

**Entity Name:** CHRISTIAN COMMUNITY SERVICE AGENCY, INC.

**Current Principal Place of Business:**

19410 NW 17TH AVE  
MIAMI GARDENS, FL 33056

**Current Mailing Address:**

19410 NW 17TH AVE  
MIAMI GARDENS, FL 33056

**FEI Number: 80-0414301**

**Certificate of Status Desired: Yes**

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

COWINS, SR., BENJAMIN B DR.  
19410 NW 17 AVE  
MIAMI GARDENS, FL 33056 US

*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: BENJAMIN B. COWINS, SR.**

**03/12/2015**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name COWINS, HARRIET  
Address 19410 NW 17TH AVE  
City-State-Zip: MIAMI GARDENS FL 33056

Title D  
Name SAMUEL, GRACE  
Address 2863 BEAUT CT  
City-State-Zip: SNELLVILLE GA 30039

Title D  
Name BOSTIC, SYLVIA M  
Address 18801 NW 52 CT  
City-State-Zip: MIAMI NS FL 33055

Title D  
Name COWINS, BENJAMIN BSR.  
Address 19419 NW 17 AVE  
City-State-Zip: MIAMI GARDENS FL 33056

*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: BENJAMIN B. COWINS, SR.**

**EXRCUTIVE DIRECTOR**

**03/12/2015**

Electronic Signature of Signing Officer/Director Detail

Date