

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000005701

**FILED**  
**Mar 31, 2017**  
**Secretary of State**  
**CC4148960043**

**Entity Name:** CHRISTIAN MEN'S MINISTRY INC

**Current Principal Place of Business:**

17 ROLLINS AVE  
ST. AUGUSTINE, FL 32084

**Current Mailing Address:**

680 N. CLAY STREET  
ST. AUGUSTINE, FL 32084 US

**FEI Number:** 27-0245401

**Certificate of Status Desired:** No

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

LYONS, JOHN WJR.  
680 N. CLAY STREET  
ST. AUGUSTINE, FL 32084 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P.  
Name TERRY, ERICH SR.  
Address 420 SOUTH NASSAU STREET  
City-State-Zip: ST. AUGUSTINE FL 32084

Title VP.  
Name GARVIN, WILLIE SR.  
Address 694 SOUTH ORANGE STREET  
City-State-Zip: ST. AUGUSTINE FL 32084

Title SEC.  
Name MERRILL, ROCKY SR.  
Address 1179 TOCOI ROAD  
City-State-Zip: ST. AUGUSTINE FL 32084

Title TRS.  
Name ROBERSON, WILBER CSR.  
Address 17 ROLLINS AVE  
City-State-Zip: ST. AUGUSTINE FL 32084

Title CAP  
Name SWILLEY, DOUGLAS SR  
Address 435 SOUTH HOLMES BLVD.  
City-State-Zip: ST. AUGUSTINE FL 32084

*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:** ERICH TERRY, SR.

**PRESIDENT**

**03/31/2017**

Electronic Signature of Signing Officer/Director Detail

Date