## 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000010602

Entity Name: CHRISTIAN SECURE MINISTRIES, INC.

FILED
Jan 16, 2018
Secretary of State
CC3205997491

## **Current Principal Place of Business:**

5609 US HWY 19 NORTH, SUITE J NEW PORT RICHEY. FL 34652

## **Current Mailing Address:**

3236 BEACON SQUARE DRIVE HOLIDAY, FL 34691 US

FEI Number: 90-0529825 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MIRRA, SHANE 6350 MISSOURI AVE. NEW PORT RICHEY, FL 34653 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: SHANE MIRRA 01/16/2018

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title S Title

Name ROSSBACH, STEPHANIE Name MIRRA, SHANE

Address 8585 GRAVE AVE Address 6350 MISSOURI AVE.

City-State-Zip: NEW PORT RICHEY FL 34654 City-State-Zip: NEW PORT RICHEY FL 34653

Title CIO Title SRVP

Name MIRRA, SHANE Name MIRRA, SHANE

Address 6350 MISSOURI AVE. Address 6560 MISSOURI AVE.

City-State-Zip: NEW PORT RICHEY FL 34653 City-State-Zip: NEW PORT RICHEY FL 34653

Title PRESIDENT

Name BERRY, PHILIP RUSSEL

Address 3236 BEACON SQUARE DRIVE

City-State-Zip: HOLIDAY FL 34691

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: PHILIP RUSSEL BERRY PRESIDENT

Electronic Signature of Signing Officer/Director Detail

01/16/2018 Date