

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

DOCUMENT# N11000003328

**Entity Name:** CHRIST MISSIONARY BIBLE COLLEGE & SEMINARY INC.

**Current Principal Place of Business:**

284 MALIBU CIR  
GREENACRES, FL 33413

**Current Mailing Address:**

284 MALIBU CIR  
GREENACRES, FL 33413 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** Yes

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

RIVERA, MARIDSSA DR.  
284 MALIBU CIR  
GREENACRES, FL 33413 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:** DR. MARIDSSA RIVERA

02/16/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name BURGOS, LUMARID  
Address 284 MALIBU CIRCLE  
City-State-Zip: GREEN ACRES FL 33413

Title CEO  
Name RIVERA, MARIDSSA  
Address 284 MALIBU CIR  
City-State-Zip: GREENACRES FL 33413

Title EXECUTIVE SECRETARY  
Name GRATEROL, ELSA  
Address 333 48TH STREET  
APT # 106  
City-State-Zip: POMPANO BEACH FL 33060

Title ASST. SECRETARY  
Name RIVERA , MARIA DEL C  
Address 2718 N.W. 2ND AVENUE  
City-State-Zip: CAPE CORAL FL 33993

Title PASTOR  
Name QUINTERO, TONI DR.  
Address 667 S. DIXIE HIGHWAY  
SUITE 2  
City-State-Zip: POMPANO BEACH FL 33060

Title TRUSTEE  
Name GONZALEZ, JERRY DR.  
Address 1712 FLETCHER ST  
City-State-Zip: HOLLYWOOD FL 33020

*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:** DR. MARIDSSA RIVERA

CEO

02/16/2017

Electronic Signature of Signing Officer/Director Detail

Date