

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19000005060

Entity Name: CHRISTIAN LEADERS MINISTRIES, INC.

Current Principal Place of Business:

2620 COVE CAY DRIVE, 305
CLEARWATER, FL 33760

Current Mailing Address:

2620 COVE CAY DRIVE, 305
CLEARWATER, FL 33760 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BUCHERT, TERENCE S ESQ
2111 TYRONE BLVD
ST. PETERSBURG, FL 33710 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 BMBR
Name REYENGA, HENRY
Address 2620 COVE CAY DRIVE, 305
City-State-Zip: CLEARWATER FL 33760

Title PRES
Name REYENGA, HENRY
Address 2620 COVE CAY DRIVE, 305
City-State-Zip: CLEARWATER FL 33760

Title DIRECTOR
Name HUNT, JAMES DR
Address 4700 W. COURT ST.
City-State-Zip: MONEE IL 60449

Title DIR
Name ZILLIG, DAVID
Address 11445 9TH STREET E
City-State-Zip: TREASURE ISLAND FL 33706

Title D
Name HAZELTON, TODD
Address 6826 O'DANIEL LOOP W
City-State-Zip: LAKELAND FL 33809

Title D
Name DECOOK, BRIAN
Address PO BOX 15773
City-State-Zip: FORT WAYNE IN 46885

Title DIRECTOR
Name ROESCH, DEBORAH
Address 716 SHORE DRIVE EAST
City-State-Zip: OLDMAR FL 34677

Title DIRECTOR
Name BRANOFF, CHRISTOPHER
Address 5711 ALASKA AVE. SE
City-State-Zip: ALTO MI 49302

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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: BRIAN DECOOK

D

01/31/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name LUCAS, ROY
Address 1578 PROVIDENCE RD.
City-State-Zip: GRAFTON MA 01519

Title DIRECTOR
Name PARR, RONALD
Address 11674 W. STATE RD 77
City-State-Zip: HAYWARD WI 54843

Title DIRECTOR
Name VAN DRUNEN, EDWARD
Address 1811 E. RIETVELD DR.
City-State-Zip: CRETE IL 60417