

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N97000004689

**Entity Name:** CHRISTIAN MISSIONS INTERNATIONAL, INC.**Current Principal Place of Business:**8750 PERIMETER PARK BOULEVARD  
JACKSONVILLE, FL 32216**Current Mailing Address:**P.O. BOX 51531  
JACKSONVILLE BEACH, FL 32240 US**FEI Number: 59-3461702****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**SIMONIC, NICHOLAS T  
8750 PERIMETER PARK BLVD  
JACKSONVILLE, FL 32216 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	DIRECTOR
Name	PRESTON, GARY
Address	1448 STRAWBERRY RDG
City-State-Zip:	SWEET HOME OR 97386

Title	PRESIDENT
Name	PUHR, JAMES J
Address	PO BOX 51531
City-State-Zip:	JACKSONVILLE FL 32240

Title	DIRECTOR
Name	CRAIG, JANE ANN
Address	1 LONE HALLOW DRIVE
City-State-Zip:	SANDY UT 84092

Title	DIRECTOR
Name	LATINI, MARIO
Address	737 BROSS STREET
City-State-Zip:	LONGMONT CO 80501

Title	DIRECTOR
Name	SIMONIC, SEAN
Address	8750 PERIMETER PARK BLVD
City-State-Zip:	JACKSONVILLE FL 32216

*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: JAMES J PUHR****PRESIDENT****02/29/2016**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date