

2013 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000004501

Entity Name: CHRIST FOR ALL NATIONS INC.

Current Principal Place of Business:

6880 LAKE ELLENOR DRIVE
ORLANDO, FL 32809

Current Mailing Address:

6880 LAKE ELLENOR DRIVE
ORLANDO, FL 32809 US

FEI Number: 94-2742504

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LAMMERT, MARK CPA
740 FLORIDA CENTRAL PARKWAY, SUITE 2028
LONGWOOD, FL 32750 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 PCD
Name KOLENDA, DANIEL
Address 6880 LAKE ELLENOR DRIVE
City-State-Zip: ORLANDO FL 32809

Title VSD
Name VAN DEN BERG, PETER
Address 6880 LAKE ELLENOR DRIVE
City-State-Zip: ORLANDO FL 32809

Title T
Name BENSON, RUSSELL
Address 6880 LAKE ELLENOR DRIVE
City-State-Zip: ORLANDO FL 32809

Title DIRECTOR
Name MOREY, DANA
Address 6880 LAKE ELLENOR DRIVE
City-State-Zip: ORLANDO FL 32809

Title DIRECTOR
Name SIMPSON, KYFFIN
Address 6880 LAKE ELLENOR DRIVE
City-State-Zip: ORLANDO FL 32809

Title DIRECTOR
Name BONNKE, REINHARD
Address 6880 LAKE ELLENOR DRIVE
City-State-Zip: ORLANDO FL 32809

Title DIRECTOR
Name HON, BARRY
Address 6880 LAKE ELLENOR DRIVE
City-State-Zip: ORLANDO FL 32809

Title DIRECTOR
Name CRANDALL, CHAUNCEY DR.
Address 6880 LAKE ELLENOR DRIVE
City-State-Zip: ORLANDO FL 32809

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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: RUSSELL BENSON

TREASURER

01/14/2013

Electronic Signature of Signing Officer/Director Detail

_____ Date

Officer/Director Detail Continued :

Title DIRECTOR
Name COTTON, RICK
Address 6880 LAKE ELLENOR DRIVE
City-State-Zip: ORLANDO FL 32809

Title DIRECTOR
Name ARNOLD, DANIEL
Address 6880 LAKE ELLENOR DRIVE
City-State-Zip: ORLANDO FL 32809