

2019 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P38228

Entity Name: CHRISTIAN WRITERS INSTITUTE, INC.**Current Principal Place of Business:**600 RINEHART RD
LAKE MARY, FL 32746**Current Mailing Address:**P. O. BOX 952248
LAKE MARY, FL 32795-2248 US**FEI Number:** 36-2614903**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DOSS, THOMAS E., III
934 E. ALTAMONTE DR., #1
ALTAMONTE SPRINGS, FL 32701 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:** THOMAS E DOSS, III

04/24/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	CP
Name	STRANG, STEPHEN E
Address	600 RINEHART ROAD
City-State-Zip:	LAKE MARY FL 32746

Title	VP
Name	WELDAY, DAVE
Address	2342 WESTMINSTER TERRACE
City-State-Zip:	OVIEDO FL 32765

Title	D
Name	GRADY, J LEE
Address	304 LITTLE SPRINGS LANE
City-State-Zip:	LONGWOOD FL 32750

Title	D
Name	MANNING, DAVID
Address	600 RINEHART RD
City-State-Zip:	LAKE MARY FL 32746-4803

Title	D
Name	NORTON JR, WILL DR.
Address	1308 PELICAN LOOP
City-State-Zip:	OXFORD MS 38655

Title	D
Name	PLAKON, SCOTT
Address	3044 TIMPANA POINT
City-State-Zip:	LONGWOOD FL 32779

Title	TREASURER
Name	SINGLETON, TERRY
Address	1773 OWASCO STREET
City-State-Zip:	WINTER SPRINGS FL 32708

Title	D
Name	JOHNSON, RON REV
Address	1675 DIXON ROAD
City-State-Zip:	LONGWOOD FL 32779

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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: KEN HARTMAN**DIRECTOR**

04/24/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title D
Name KING, ALVEDA DR.
Address 1891 COUNTRY LINE ROAD
City-State-Zip: ATLANTA GA

Title DIRECTOR
Name MAYNARD, SHAWN
Address 2204 NW 29TH AVE
City-State-Zip: GAINESVILLE FL 32605

Title DIRECTOR
Name WILES, JEREMY
Address 7000 SE FEDERALHWY
SUITE 100
City-State-Zip: STUART FL 33497

Title SECRETARY
Name SCHIMBENO, CHRISTINA
Address 600 RINEHART RD
City-State-Zip: LAKE MARY FL 32746-4803

Title DIRECTOR
Name HARTMAN, KEN
Address 600 RINEHART ROAD
City-State-Zip: LAKE MARY FL 32746

Title DIRECTOR
Name GREENE, STEVE DR.
Address 600 RINEHART ROAD
City-State-Zip: LAKE MARY FL 32746

Title DIRECTOR
Name PEREZ, MARCOS
Address 600 RINEHART ROAD
City-State-Zip: LAKE MARY FL 32746