DOCOMEN	Γ# N1600007321			Aug 15, 2022
Entity Name	: CHRIST COMMUNITY CHURCH OF SOUTH	H FLORIDA, IN	1C.	Secretary of State 4809606991CC
10411 NW 20 S	ncipal Place of Business: BT. NES, FL 33026			480900099100
Current Mai	iling Address:			
P.O. BOX 26 PEMBROKE	0117 PINES, FL 33026 US			
FEI Number: 81-2739773 Certificate		Certificate of	Status Desired: No	
Name and A	Address of Current Registered Agent:			
DIAZ, BERNIE 10411 NW 20 S	8T. NES. FL 33026 US			
PEMBROKE P	NE3, FL 33020 03			
	d entity submits this statement for the purpose of changing its regi	stered office or regis	tered agent, or both, ir	n the State of Florida.
	d entity submits this statement for the purpose of changing its regi	stered office or regis	tered agent, or both, ir	n the State of Florida.
The above name	d entity submits this statement for the purpose of changing its regi	stered office or regis	tered agent, or both, ir	n the State of Florida. Date
The above name SIGNATURI	d entity submits this statement for the purpose of changing its regi	stered office or regis	tered agent, or both, ir	
The above name SIGNATURI	d entity submits this statement for the purpose of changing its regise: E: Electronic Signature of Registered Agent	stered office or regis	tered agent, or both, ir	
The above name SIGNATURE Officer/Dire	d entity submits this statement for the purpose of changing its regises E: Electronic Signature of Registered Agent Ctor Detail :			Date
The above name SIGNATURE Officer/Dire Title	d entity submits this statement for the purpose of changing its regis E: Electronic Signature of Registered Agent Ctor Detail : P	Title	S	Date
The above name SIGNATURE Officer/Dire Title Name	d entity submits this statement for the purpose of changing its regis E: Electronic Signature of Registered Agent Ctor Detail : P DIAZ, BERNIE 10411 NW 20 ST.	Title Name	S QUINONES, JOR 10411 NW 20 ST.	Date
The above name SIGNATURE Officer/Dire Title Name Address	d entity submits this statement for the purpose of changing its regis E: Electronic Signature of Registered Agent Ctor Detail : P DIAZ, BERNIE 10411 NW 20 ST.	Title Name Address	S QUINONES, JOR 10411 NW 20 ST.	Date
The above name SIGNATURE Officer/Dire Title Name Address City-State-Zip:	d entity submits this statement for the purpose of changing its regis Electronic Signature of Registered Agent Ctor Detail : P DIAZ, BERNIE 10411 NW 20 ST. PEMBROKE PINES FL 33026	Title Name Address	S QUINONES, JOR 10411 NW 20 ST.	Date

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

City-State-Zip: PEMBROKE PINES FL 33026

DOCUMENT# N16000007321

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: BERNIE DIAZ

PRESIDENT

08/15/2022 Date

FILED Aug 15, 2022

Electronic Signature of Signing Officer/Director Detail