

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
May 02, 2011
Secretary of State**

DOCUMENT# N01000008825

Entity Name: PINNACLE OF FAITH MINISTRY, INC.

Current Principal Place of Business:

4599 SW DAEMON ST
PORT SAINT LUCIE, FL 34983

New Principal Place of Business:

Current Mailing Address:

4599 SW DAEMON ST
PORT SAINT LUCIE, FL 34983

New Mailing Address:

FEI Number: 01-0606614 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'BRIEN, CLAUDETTE
4599 S.W DAEMON STREET
PORT SAINT LUCIE, FL 35953 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD
Name: O'BRIEN, CLAUDETTE
Address: 4599 S.W DAEMON STREET
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: S
Name: MCGLASHIN, HAZEL
Address: 4599 S.W DAEMON STREET
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: TRD
Name: MORGAN, MERCELLA
Address: 5801 NW 86TH AVENUE
City-St-Zip: TAMARAC, FL 33321

Title: D
Name: MAKKS, ROSELYN
Address: 2021 NW 77TH AVENUE
City-St-Zip: SUNRISE, FL 33322

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: CLAUDETTE O'BRIEN

PD

05/02/2011

Electronic Signature of Signing Officer or Director

Date