

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000487

**FILED**  
**Apr 03, 2011**  
**Secretary of State**

**Entity Name:** PERKINS FAMILY MINISTRIES, INC.

**Current Principal Place of Business:**

20660 CAPELLO DR  
VENICE, FL 34292

**New Principal Place of Business:**

**Current Mailing Address:**

20660 CAPELLO DR  
VENICE, FL 34292

**New Mailing Address:**

**FEI Number:** 20-4356424

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PERKINS, ANNETTE M  
20660 CAPELLO DR  
VENICE, FL 34292 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: D  
Name: PERKINS, ROBERT M  
Address: 20660 CAPELLO DR  
City-St-Zip: VENICE, FL 34292

Title: D  
Name: PERKINS, ANNETTE M  
Address: 20660 CAPELLO DR  
City-St-Zip: VENICE, FL 34292

Title: D  
Name: PERKINS, ROBIN M  
Address: 20660 CAPELLO DR  
City-St-Zip: VENICE, FL 34292

Title: D  
Name: PERKINS, KRISTEEN CPA  
Address: 254 MIAMI AVE., W  
City-St-Zip: VENICE, FL 34285

Title: D  
Name: HART, RICHARD  
Address: 1314 CRABTREE LANE  
City-St-Zip: MONETA, VA 24121

Title: D  
Name: HART, BARBIE  
Address: 1314 CRABTREE LANE  
City-St-Zip: MONETA, VA 24121

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: ANNETTE PERKINS

SECR

04/03/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date