

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768901

Entity Name: SOUTH FLORIDA JAIL MINISTRIES, INC.**Current Principal Place of Business:**22790 S.W. 112 AVE
MIAMI, FL 33170**Current Mailing Address:**22790 S.W. 112 AVE
MIAMI, FL 33170 US**FEI Number: 59-2471230****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**HERNANDEZ, SANDRA
22790 SW 112 AVE
MIAMI, FL 33170 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	FD
Name	HERNANDEZ, JOSE E DR.
Address	22790 SW 112 AVE
City-State-Zip:	MIAMI FL 33170

Title	D
Name	LORENZO, LISA
Address	22790 SW 112 AVE
City-State-Zip:	MIAMI FL 33170

Title	PCEO
Name	PEREZ, CLAUDIO M DR.
Address	22790 SW 112 AVE
City-State-Zip:	MIAMI FL 33170

Title	DVC
Name	BURKE, JIMMY R DR.
Address	22790 SW 112 AVE
City-State-Zip:	MIAMI FL 33170

Title	DST
Name	EADS, JACQUELINE L
Address	22790 SW 112 AVE
City-State-Zip:	MIAMI FL 33170

Title	D
Name	VANDER WAL, RAY DR.
Address	22790 SW 112 AVE
City-State-Zip:	GOULDS FL 33170

Title	DC
Name	WHITE, WILLIAM DR.
Address	22790 SW 112 AVE
City-State-Zip:	MIAMI FL 33170

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: CLAUDIO M. PEREZ**PRESIDENT AND CEO****01/26/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date