

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007724

Entity Name: KAIROS SEA MINISTRIES, INC.**Current Principal Place of Business:**411 WALNUT ST
1038
GREEN COVE SPRINGS, FL 32043-3443**Current Mailing Address:**411 WALNUT ST
1038
GREEN COVE SPRINGS, FL 32043-3443 US**FEI Number:** 35-2180230**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HORMANN, JAMES K
411 WALNUT ST
1038
GREEN COVE SPRINGS, FL 32043-3443 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	PRES
Name	VANCE, DAVID M
Address	116 DELLWOOD AVE
City-State-Zip:	PALATKA FL 32177

Title	VP
Name	HAMILTON, JOSEPH
Address	1412 WALNUT ST
City-State-Zip:	JACKSONVILLE FL 32206

Title	SEC
Name	VANCE, MELANIE H
Address	116 DELLWOOD AVE
City-State-Zip:	PALATKA FL 32177

Title	TREA
Name	HORMANN, JAMES K
Address	411 WALNUT ST 1038
City-State-Zip:	GREEN COVE SPRINGS FL 32043-3443

Title	DR
Name	HORMANN, PEGGY
Address	411 WALNUT ST 1038
City-State-Zip:	GREEN COVE SPRINGS FL 32043-3443

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: JAMES K. HORMANN**TREASURER****03/03/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date