

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001305

Entity Name: GOD OF COMPASSION MINISTRIES, INC.

Current Principal Place of Business:

18050 SW 355 ST
FLORIDA CITY, FL 33034

Current Mailing Address:

18050 SW 355 ST
FLORIDA CITY, FL 33034

FEI Number: 65-1083124

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GUY D. SPERDUTO, CPA, PA
8982 TAFT STREET
PEMBROKE PINES, FL 33024 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 PD
Name CHARLES, FRITZ
Address 18050 SW 355 STREET
City-State-Zip: FLORIDA CITY FL 33034

Title VD
Name CHERUBIN, ROOSEVELT
Address 1517 INVERNESS STREET
City-State-Zip: PORT CHALOTTE FL 33952

Title TD
Name WILSON, ELIZABETH M
Address 133 LAKE VIEW DRIVE NORTH
City-State-Zip: MACON GA 31210

Title SD
Name CARTER, WALKER G///
Address 3285 VISTA CIR
City-State-Zip: MACON GA 31204

Title VP
Name WILSON, PERRY A
Address 133 LAKE VIEW DRIVE NORTH
City-State-Zip: MACON GA 31210

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: ELIZABETH M. WILSON

TREASURER

04/21/2014

Electronic Signature of Signing Officer/Director Detail

Date