

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000004572

**Entity Name:** DAUGHTERS OF NAOMI, INC.**Current Principal Place of Business:**130 S INDIAN RIVER DR.  
SUITE 301  
FORT PIERCE, FL 34982**Current Mailing Address:**4049 GREENWOOD DR.  
FORT PIERCE, FL 34982 US**FEI Number:** 11-3643449**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NOACH, THERESA  
4049 GREENWOOD DR  
FORT PIERCE, FL 34982 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:** THERESA NOACH

05/01/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            TREASURER  
Name            CRUZ, HEATHER  
Address        1117 SW ABINGDON AVE  
City-State-Zip: PORT ST LUCIE FL 34953

Title            CO-TRUSTEE  
Name            BROWN, KENNETH DR.  
Address        5261 TREE TOP TRAIL  
City-State-Zip: FORT PIERCE FL 34951

Title            PRESIDENT, CEO, PASTOR  
Name            NOACH, THERESA A  
Address        4049 GREENWOOD DR.  
City-State-Zip: FORT PIERCE FL 34982

Title            TRUSTEE  
Name            FRASER, KEN  
Address        10 HARBOUR ISLES DR. EAST  
City-State-Zip: FORT PIERCE FL 34989

Title            SECRETARY  
Name            CALVO, SARA  
Address        13 VIRGINIA PARK BLVD  
City-State-Zip: FORT PIERCE FL 34947

Title            OTHER  
Name            BROWN, LYNN  
Address        5261 TREE TOP TRAIL  
City-State-Zip: FORT PIERCE FL 34951

Title            OFFICER  
Name            NOACH, JOSEPH R JR.  
Address        4049 GREENWOOD DR.  
City-State-Zip: FORT PIERCE FL 34982

*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:** THERESA NOACH

ED

05/01/2021

Electronic Signature of Signing Officer/Director Detail

Date