

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004648

Entity Name: VERSE BY VERSE MINISTRIES, INC.**Current Principal Place of Business:**1893 SUNSET POINT ROAD
CLEARWATER, FL 33765**Current Mailing Address:**P.O. BOX 5884
CLEARWATER, FL 33756**FEI Number:** 25-1916950**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MILLS, BRUCE A
1893 SUNSET POINT ROAD
CLEARWATER, FL 33765 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:** BRUCE A. MILLS

02/08/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name KRELOFF, STEVEN A
Address 1893 SUNSET POINT ROAD
City-State-Zip: CLEARWATER FL 33765

Title DIRECTOR, VP
Name KRELOFF, BENJAMIN J
Address 1893 SUNSET POINT ROAD
City-State-Zip: CLEARWATER FL 33765

Title DIRECTOR
Name TROFEMUK JR, NICHOLAS J
Address 1893 SUNSET POINT ROAD
City-State-Zip: CLEARWATER FL 33765

Title DIRECTOR, SECRETARY
Name JENSEN, JAMES K
Address 1893 SUNSET POINT ROAD
City-State-Zip: CLEARWATER FL 33765

Title DIRECTOR, PRESIDENT
Name MILLS, BRUCE A
Address 1893 SUNSET POINT ROAD
City-State-Zip: CLEARWATER FL 33765

Title DIRECTOR
Name WHITE, JAMES R
Address 1893 SUNSET POINT ROAD
City-State-Zip: CLEARWATER FL 33765

Title DIRECTOR
Name FRAIRE, ROBERT
Address 1893 SUNSET POINT ROAD
City-State-Zip: CLEARWATER FL 33765

Title DIRECTOR
Name KING, SPENCER
Address 1893 SUNSET POINT ROAD
City-State-Zip: CLEARWATER FL 33765

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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: BRUCE A MILLS

PRESIDENT

02/08/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name BRUNS, JASON
Address 1893 SUNSET POINT ROAD
City-State-Zip: CLEARWATER FL 33765

Title DIRECTOR
Name JENKINS, DAVID
Address 1893 SUNSET POINT ROAD
City-State-Zip: CLEARWATER FL 33765

Title DIRECTOR
Name PURCELL, JOEL
Address 1893 SUNSET POINT RD
City-State-Zip: CLEARWATER FL 33765

Title DIRECTOR
Name JENKINS, JACK
Address 1893 SUNSET POINT RD
City-State-Zip: CLEARWATER FL 33765