

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009056

Entity Name: MESSAGE MINISTRIES & MISSIONS, INC.**Current Principal Place of Business:**6697 27TH WAY NORTH
SAINT PETERSBURG, FL 33702**Current Mailing Address:**6697 27TH WAY NORTH
SAINT PETERSBURG, FL 33702**FEI Number:** 20-8331536**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NICHOLAS W. MULICK,P.A.
91645 OVERSEAS HIGHWAY
TAVERNIER, FL 33070 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	MR.
Name	WELLER, BRIAN M
Address	6697 27TH WAY NORTH
City-State-Zip:	ST. PETERSBURG FL 33702

Title	MR.
Name	WEATHERLY, GUYTON
Address	6643 CLAIR SHORE DRIVE
City-State-Zip:	APOLLO BEACH, FL 34572

Title	MS.
Name	MCCONNEL, NANCY
Address	500 23RD AVE. NORTH
City-State-Zip:	ST. PETERSBURG FL 33704

Title	MR.
Name	MOORE, CHARLES
Address	3577 VINE SPRINGS PLACE
City-State-Zip:	BETHLEHEM GA 30620

Title	MR.
Name	HERRICK, RICHARD A
Address	242 HIBISCUS ST.
City-State-Zip:	TAVERNIER FL 33070

Title	MRS.
Name	WELLER, ANNE M
Address	6697 27TH WAY NORTH
City-State-Zip:	ST. PETERSBURG FL 33702

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: BRIAN WELLER**PRESIDENT****03/17/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date