

**2017 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	PRESIDENT
Name	WELLER, BRIAN M
Address	6697 27TH WAY NORTH
City-State-Zip:	ST. PETERSBURG FL 33702

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

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

Title	PASTOR
Name	SIMON, MARLIN
Address	PO BOX 904,
City-State-Zip:	ISLAMORADA, FL 33036

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

Title	SECRETARY
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****03/06/2017**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date