

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010745

Entity Name: HIT THE MARK MINISTRIES I, INC.**Current Principal Place of Business:**310 BLACKWATER PLACE
LONGWOOD, FL 32750**Current Mailing Address:**310 BLACKWATER PLACE
LONGWOOD, FL 32750 US**FEI Number:** 87-0785553**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WILLIAMS, SUSAN JESQ.
280 SOUTH RONALD REAGAN BLVD
LONGWOOD, FL 32750 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	PAYNE, MARK
Address	512 SPRING CLUB DR
City-State-Zip:	ALTAMONTE SPRINGS FL 32714

Title	STD
Name	PAYNE, STEPHANIE
Address	512 SPRING CLUB DR
City-State-Zip:	ALTAMONTE SPRINGS FL 32714

Title	D
Name	HOLDEN, JANE
Address	512 SPRING CLUB DR
City-State-Zip:	ALTAMONTE SPRINGS FL 32714

Title	VD
Name	PAYNE, JAMES
Address	512 SPRING CLUB DR
City-State-Zip:	ALTAMONTE SPRINGS FL 32714

Title	D
Name	HOLDEN, BRAD
Address	512 SPRING CLUB DR
City-State-Zip:	ALTAMONTE SPRINGS FL 32714

Title	D
Name	SHIPMAN, WHITNEY
Address	512 SPRING CLUB DR
City-State-Zip:	ALTAMONTE SPRINGS FL 32714

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: MARK PAYNE**PRESIDENT****04/10/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date