

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012470

Entity Name: EASTMINSTER GLOBAL MISSIONS, INC.**Current Principal Place of Business:**334 SECOND AVENUE
INDIALANTIC, FL 32903**Current Mailing Address:**P.O. BOX 33473
INDIALANTIC, FL 32903 US**FEI Number:** 16-1779315**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SCHILLINGER, CHARLES A ESQ.
1311 BEDFORD DRIVE
MELBOURNE, FL 32940 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:** CHARLES A. SCHILLINGER, ESQUIRE

02/24/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP, DIRECTOR
Name DERRICK, MICHAEL
Address 477 PIRATES MOON COURT
City-State-Zip: INDIALANTIC FL 32903

Title DIRECTOR
Name HERMANDSORFER, JOHN
Address 1861 RIVER SHORE DRIVE
City-State-Zip: INDIALANTIC FL 32903

Title SECRETARY, DIRECTOR
Name SCHILLINGER, PAMELA
Address 2102 SIROCO LANE
City-State-Zip: MELBOURNE FL 32934

Title TREASURER, DIRECTOR
Name BECKWITH, SANDRA
Address 334 SECOND AVENUE
City-State-Zip: INDIALANTIC FL 32903

Title PRESIDENT, DIRECTOR
Name BECKWITH, DAVID
Address 334 SECOND AVENUE AVENUE
City-State-Zip: INDIALANTIC FL 32903

Title DIRECTOR
Name STELLAKIS, PATRICIA
Address 316 SCHOOL ROAD
City-State-Zip: INDIAN HARBOUR BEACH FL 32937

Title DIRECTOR
Name WHEELER, WINSTON
Address 434 OAKLAND AVENUE
City-State-Zip: INDIALANTIC FL 32903

Title DIRECTOR
Name WHEELER, LINDA
Address 434 OAKLAND AVENUE
City-State-Zip: INDIALANTIC FL 32903

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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: PAMELA SCHILLINGER**SECRETARY**

02/24/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	BILS, KATHY
Address	690 FOUNTAIN BLVD.
City-State-Zip:	SATELLITE BEACH FL 32937