

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Feb 01, 2018
Secretary of State
CC3393441312

Entity Name: SPIRIT WIND MINISTRIES, INC.

Current Principal Place of Business:

8103 INDRIO ROAD
FORT PIERCE, FL 34951

Current Mailing Address:

8515 INDRIO ROAD
FORT PIERCE, FL 34951

FEI Number: 20-8692027

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HAMMOCK, DWAIN
6902 SALERNO ROAD
FORT PIERCE, FL 34951 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 HAMMOCK, DWAIN
Address 6902 SALERNO ROAD
City-State-Zip: FORT PIERCE FL 34951

Title STD
Name HAMMOCK, LINDA
Address 6902 SALERNO ROAD
City-State-Zip: FORT PIERCE FL 34951

Title D
Name HARNED, ANTHONY
Address 174 S. W. PORT ST. LUCIE BLVD.
City-State-Zip: PORT ST LUCIE FL 34984

Title D
Name FIORENZO, GEORGE
Address 7701 HIBISCUS ROAD
City-State-Zip: FORT PIERCE FL 34951

Title VD
Name REXFORD, JOHN
Address 550 W. FORREST TRAIL
City-State-Zip: VERO BEACH FL 32962

Title DIRECTOR
Name ROBINSON, KENNETH
Address 1225 17TH LANE SW
City-State-Zip: VERO BEACH FL 32962

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: DWAIN HAMMOCK

PRESIDENT

02/01/2018

Electronic Signature of Signing Officer/Director Detail

Date