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.

PRESIDENT

SIGNATURE: GUNIETTE BRINSON

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# N07000011501

Entity Name: GUNIETTE MINISTRIES COMMUNITY DEVELOPMENT CORPORATION

Current Principal Place of Business:

18805 NORTH MIAMI AVE MIAMI, FL 33169

Current Mailing Address:

P.O. BOX 69-3092 MIAMI, FL 33269

FEI Number: 22-3972927

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 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

Officer/Director Detail :

	Title	PRESIDENT, DIRECTOR, TREASURER	Title	ASST TREASURER, TRUSTEE
	Name	BRINSON, GUNIETTE	Name	WILLIAMS, TAMURA
	Address	P.O. BOX 69-3092	Address	P.O. BOX 69-3092
	City-State-Zip:	MIAMI FL 33269	City-State-Zip:	MIAMI FL 33269
	Title Name Address City-State-Zip:	SECRETARY, ASST. TREASURER, TRUSTEE HOLMES, TARIZA P.O. BOX 69-3092 MIAMI FL 33269	Title Name Address City-State-Zip:	D WRIGHT, ALPHONSE P.O. BOX 69-3092 MIAMI FL 33269
	Title Name Address City-State-Zip:	VICE PRESIDENT/ DIRECTOR MAJOR, ANTHONY M P.O. BOX 69-3092 MIAMI FL 33269		

FILED Feb 12, 2018 Secretary of State CC6050864016

Certificate of Status Desired: No

02/12/2018 Date

Date