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: GUNIETTE BRINSON

Electronic Signature of Signing Officer/Director Detail

DIRECTOR/PRESIDENT 02/13/2014

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	VP, 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	SECRETARY, ASST. TREASURER, TRUSTEE	Title Name	D WRIGHT, ALPHONSE
Name	HOLMES, TARIZA	Address City-State-Zip:	P.O. BOX 69-3092
Address	P.O. BOX 69-3092		MIAMI FL 33269
City-State-Zip:	MIAMI FL 33269		

Current Principal Place of Business:

Name and Address of Current Registered Agent:

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

18805 NORTH MIAMI AVENUE MIAMI, FL 33169

Current Mailing Address:

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

CORPORATION

FEI Number: 22-3972927

DOCUMENT# N07000011501 Entity Name: GUNIETTE MINISTRIES COMMUNITY DEVELOPMENT

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Date

FILED Feb 13, 2014 Secretary of State CC7878156944

Certificate of Status Desired: No