

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000012102

Entity Name: BROOK IN THE WAY EVANGELISTIC MINISTRIES, INC.**Current Principal Place of Business:**4048 DUNCAN LANE
TALLAHASSEE, FL 32303**Current Mailing Address:**4048 DUNCAN LANE
TALLAHASSEE, FL 32303**FEI Number:** 42-1748173**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JAMES-ROBINSON, CASSONDRA L.
309 REYNOLDS RD.
QUINCY, FL 32351 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	P
Name	CHAMBERS, DELTON N.
Address	4048 DUNCAN LANE
City-State-Zip:	TALLAHASSEE FL 32303

Title	DIRECTOR
Name	DOWLING, ANTHONY
Address	4048 DUNCAN LANE
City-State-Zip:	TALLAHASSEE FL 32303

Title	D
Name	KELLY, JOHNNY SR.
Address	4048 DUNCAN LANE
City-State-Zip:	TALLAHASSEE FL 32303

Title	DIRECTOR
Name	HARRIS, MONTRAIL
Address	4048 DUNCAN LANE
City-State-Zip:	TALLAHASSEE FL 32303

Title	D
Name	MANN, SHANTIELLA
Address	4048 DUNCAN LANE
City-State-Zip:	TALLAHASSEE FL 32303

Title	D
Name	CHAMBERS, DUNK JR
Address	4048 DUNCAN LANE
City-State-Zip:	TALLAHASSEE FL 32303

Title	D
Name	TENNYSON, TONY
Address	4048 DUNCAN LANE
City-State-Zip:	TALLAHASSEE FL 32303

Title	DIRECTOR
Name	KELLY, YVETTE
Address	4048 DUNCAN LANE
City-State-Zip:	TALLAHASSEE FL 32303

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: DELTON N. CHAMBERS**P****05/09/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date