

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07402

**Entity Name:** DAYBREAK MINISTRIES, INC.

**Current Principal Place of Business:**

1040 BAYVIEW DR., STE. 317  
FT. LAUDERDALE, FL 33304

**Current Mailing Address:**

1040 BAYVIEW DR., STE. 317  
FT. LAUDERDALE, FL 33304

**FEI Number:** 59-2595536

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

JONES, KEITH  
1040 BAYVIEW DR  
SUITE 317  
FT. LAUDERDALE, FL 33304 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 CDP  
Name SOLOMON, STEPHEN ALAN  
Address 3900 NE 18 AVENUE #24  
City-State-Zip: FT. LAUDERDALE FL

Title V  
Name JONES, KEITH  
Address 3900 NE 18 AVE. #47  
City-State-Zip: OAKLAND PARK FL 33334

Title S  
Name WOOD, BETTIE  
Address 2115 NE 37 DRIVE  
City-State-Zip: FORT LAUDERDALE FL 33308

Title T  
Name SOLOMON, DAWN  
Address 3241 VILLANOVA DRIVE  
City-State-Zip: LOUISVILLE KY 40220

Title D  
Name DINAN, TOM  
Address 1001 SE 6TH AVE APT B-207  
City-State-Zip: DEERFIELD BEACH FL 33441-6976

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:** KEITH JONES

**VICE PRESIDENT**

**04/20/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date