

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

DOCUMENT# N08000002877

**Entity Name:** TOUCHED BY JESUS MINISTRIES, INC.

**Current Principal Place of Business:**

3737 ST. JOHNS BLUFF ROAD SOUTH  
# 505  
JACKSONVILLE, FL 32204

**Current Mailing Address:**

3737 ST. JOHNS BLUFF ROAD SOUTH  
# 505  
JACKSONVILLE, FL 32204 US

**FEI Number:** 26-2165520

**Certificate of Status Desired:** No

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

KITTLE, DONALD R  
3737 ST. JOHNS BLUFF ROAD SOUTH  
# 505  
JACKSONVILLE, FL 32204 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:** DONALD R. KITTLE

07/01/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DP  
Name KITTLE, DONALD R  
Address 260 KOSER ROAD  
City-State-Zip: LITITZ PA 17543

Title DS  
Name KITTLE, DONALD  
Address 260 KOSER ROAD  
City-State-Zip: LITITZ PA 17543

Title OTHER  
Name LISA, BURCH  
Address 4313 13TH STREET WEST  
City-State-Zip: LEHIGH ACRES FL 33971

Title TREASURER  
Name KERN, ANN M  
Address 3737 ST. JOHNS BLUFF ROAD SOUTH  
# 505  
City-State-Zip: JACKSONVILLE FL 32204

*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:** DONALD KITTLE

**DIRECTOR**

07/01/2017

Electronic Signature of Signing Officer/Director Detail

Date