

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000001018

Entity Name: ALLIANCE PRIMITIVE MINISTRIES, INC**Current Principal Place of Business:**600 LINDELL BLVD
APT# 103A
DELRAY BEACH, FL 33444**Current Mailing Address:**2411 NORTH FEDERAL HWY
DELRAY BEACH, FL 33483 US**FEI Number:** 20-4529084**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**JEUDY, JULIEN
10466 BOYNTON PLACE CIRCLE
BOYNTON BEACH, FL 33437 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	JEUDY, JULIEN
Address	5070 ELMHURST ROAD, APT E
City-State-Zip:	WEST PALM BEACH FL 33417

Title	VP/MGR
Name	JEUDY, DANIEL
Address	10466 BOYNTON PLACE CIRCLE
City-State-Zip:	BOYNTON BEACH FL 33437

Title	ADV
Name	MASSON, ELVIDA
Address	9407 GREEN POINTE DRIVE
City-State-Zip:	TAMPA FL 33626

Title	VP
Name	JEUDY, LAUSANE
Address	5070 ELMHURST ROAD, APT E
City-State-Zip:	WEST PALM BEACH FL 33417

Title	SECT
Name	JEUDY, JEAN
Address	5070 ELMHURST RD. # E
City-State-Zip:	WEST PALM BEACH FL 33417

Title	SECT
Name	JEUDY, HERMENCIA
Address	10466 BOYNTON PLACE CIRCLE
City-State-Zip:	WEST PALM BEACH FL 33437

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: JULIEN JEUDY**PRESIDENT****04/21/2014**

Electronic Signature of Signing Officer/Director Detail

Date