

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000006093

Entity Name: HALIFAX AREA MINISTERIAL ASSOCIATION, INC.**Current Principal Place of Business:**

C/O REV. JOHN LONG
1090 GEORGE ENGRAM BLVD
DAYTONA BEACH, FL 32114

Current Mailing Address:

C/O REV. JOHN LONG
226 N NOVA RD, PMB 183
ORMOND BEACH, FL 32174 US

FEI Number: 27-0410419**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**

PALMETTO CHARTER SERVICES, INC.
150 MAGNOLIA AVENUE
DAYTONA BEACH, FL 32115 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 PRESIDENT
Name LONG, JOHN
Address 1090 GEORGE ENGRAM BLVD
City-State-Zip: DAYTONA BEACH FL 32114

Title VICE PRESIDENT-MEMBERSHIP
Name STORK, DAVID
Address 1301 BEVILLE RD. #19
City-State-Zip: DAYTONA BEACH FL 32119

Title ACTING SECRETARY
Name TBA, TBA
Address C/O REV. JOHN LONG
 226 N NOVA RD, PMB 183
City-State-Zip: ORMOND BEACH FL 32174

Title ACTING TREASURER
Name LONG, JOHN
Address C/O REV. JOHN LONG
 1090 GEORGE ENGRAM BLVD
City-State-Zip: DAYTONA BEACH FL 32114

Title VICE PRESIDENT-PROGRAM
Name TURNER, SHEILA
Address 1687 W. GRANADA BLVD
City-State-Zip: ORMOND BEACH FL 32174

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: JOHN LONG**PRESIDENT****04/11/2014**

Electronic Signature of Signing Officer/Director Detail

Date