

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000002025

**Entity Name:** BRANDON SPIKER MINISTRIES INC.

**Current Principal Place of Business:**

1703 LAUREL CIRCLE  
154  
BARTOW, FL 33830

**FILED**  
**Apr 12, 2013**  
**Secretary of State**  
**CC4530907278**

**Current Mailing Address:**

POST OFFICE BOX 1324  
BARTOW, FL 33831 US

**FEI Number: 27-2004648**

**Certificate of Status Desired: No**

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

SPIKER, BRANDON L  
1703 LAUREL CIRCLE  
154  
BARTOW, FL 33830 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            PRES  
Name            SPIKER, BRANDON L  
Address        1703 LAUREL CIRCLE  
                  154  
City-State-Zip: BARTOW FL 33830

Title            TREA  
Name            SPIKER, CARLENE R  
Address        1703 LAUREL CIRCLE  
                  154  
City-State-Zip: BARTOW FL 33830

Title            SEC  
Name            SEE, VANETTE S  
Address        2640 EAST MAIN STREET  
City-State-Zip: WAUCHULA FL 33873

Title            DIRECTOR, RANDY L COGGINS  
Name            COGGINS, RANDY L DR.  
Address        2025 BARTOW ROAD  
City-State-Zip: LAKELAND FL 33801

*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: BRANDON LEVI SPIKER**

**MR.**

**04/12/2013**

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

\_\_\_\_\_  
Date