

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000004941

FILED
Apr 06, 2020
Secretary of State
5735236844CC

Entity Name: HABITAT FOR CHILDREN MINISTRIES.INC

Current Principal Place of Business:

397 SE STARFISH AVE
PORT ST LUCIE, FL 34983

Current Mailing Address:

397 SE STARFISH AVE
PORT ST LUCIE, FL 34983 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ST. AMOUR, MESCHAC
397 SE STARFISH AVE
PORT ST LUCIE, FL 34983 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: MESCHAC ST. AMOUR

04/06/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name MESCHAC ST AMOUR
Address 397 SE STARFISH AVE
City-State-Zip: PORT ST LUCIE FL 34983

Title EXECUTIVE SECRETARY
Name SHIRLON, ST AMOUR D
Address 397 SE STARFISH AVE
City-State-Zip: PORT ST LUCIE FL 34983

Title INTERNATIONAL TEAM LEADER
Name TAMMI, LATHAM
Address 397 SE STARFISH AVE
City-State-Zip: PORT ST LUCIE FL 34983

Title VP
Name ANDRE, JOLY PAUL
Address 397 SE STARFISH AVE
City-State-Zip: PORT ST LUCIE FL 34983

Title OFFICER
Name ARLET, EUGENE
Address 3170 AIRMANS DR. UNIT 1151
City-State-Zip: FORT PIERCE FL 34946

Title ELDER
Name MCCARTY , JONNIE
Address 397 SE STARFISH AVE
City-State-Zip: PORT ST LUCIE FL 34983

Title NORTHERN AMBASSADOR
Name HEATHER, JULSETH RECHNER
Address 397 SE STARFISH AVE
City-State-Zip: PORT ST LUCIE FL 34983

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: MESCHAC ST AMOUR

PRESIDENT

04/06/2020

Electronic Signature of Signing Officer/Director Detail

Date