

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

DOCUMENT# N12000010505

**Entity Name:** DR. BONNIE HILL MINISTRIES, INC.

**Current Principal Place of Business:**

2219 SE MORNINGSID E BOULEVARD  
PORT ST. LUCIE, FL 34952

**Current Mailing Address:**

2219 SE MORNINGSID E BOULEVARD  
PORT ST. LUCIE, FL 34952

**FEI Number:** 46-1332537

**Certificate of Status Desired:** Yes

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

GRASSROOTS CONSULTING, INC.  
1149 WEST 33RD STREET  
RIVIERA BEACH, FL 33404 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 HILL, BLONDELL  
Address 2219 MORNINGSID E BOULEVARD  
City-State-Zip: PORT ST. LUCIE FL 34952

Title T  
Name SPATES, CHARLES  
Address P.O. BOX 975  
City-State-Zip: JENSEN BEACH FL 34958

Title S  
Name TROUTMAN, CRYSTAL  
Address 1757 BELLA VISTA WAY  
City-State-Zip: PORT ST. LUCIE FL 34952

*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:** BLONDELL HILL

**PRESIDENT**

**04/30/2013**

Electronic Signature of Signing Officer/Director Detail

Date