

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000000567

Entity Name: FROSTPROOF MINISTERIAL ASSOCIATION, INC.

Current Principal Place of Business:

125 NORTH PLAM AVENUE
FROSTPROOF, FL 33843

Current Mailing Address:

PO BOX 302
FROSTPROOF, FL 33843

FEI Number: 46-1894296

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MATTOX, JOSEPH E. DR.
13 FORT CLINCH HEIGHTS ROAD
FROSTPROOF, FL 33843 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: JOSEPH E. MATTOX

02/03/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TD
Name WATERS, RALPH C. REV.
Address 17 SOUTH SCENIC HIGHWAY
City-State-Zip: FROSTPROOF FL 33843

Title PD
Name ARMS, MICHAEL REV.
Address 1201 PINE AVE
City-State-Zip: FROSTPROOF FL 33843

Title VPD
Name ELDER, WILLIAM H. REV.
Address 318 WEST ASH STREET
City-State-Zip: FROSTPROOF FL 33843

Title S
Name SMITH, BRIAN H. REV.
Address 150 DEVANE STREET
City-State-Zip: FROSTPROOF FL 33843

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: BRIAN H. SMITH

SECRETARY

02/03/2014

Electronic Signature of Signing Officer/Director Detail

Date