

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000009719

Entity Name: TELL THE WORLD MINISTRIES, INC.**Current Principal Place of Business:**C/O LITTLE RIVER COMMUNITY CENTER
7900 NW 27TH AVE. STE E233/TTWM
MIAMI, FL 33147**Current Mailing Address:**C/O LITTLE RIVER COMMUNITY CENTER
7900 NW 27TH AVE. STE E233/TTWM
MIAMI, FL 33147 US**FEI Number:** 13-4117133**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**MICHEL, MIRLANDE DINA M
C/O LITTLE RIVER COMMUNITY CENTER
7900 NW 27TH AVE. STE E233/TTWM
MIAMI, FL 33147 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:** MIRLANDE DINA M MICHEL

05/02/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, DIRECTOR
Name MICHEL, MIRLANDE DINA M
Address C/O LITTLE RIVER COMMUNITY
 CENTER
 7900 NW 27TH AVE. STE E233/TTWM
City-State-Zip: MIAMI FL 33147

Title DIRECTOR
Name ADESANYA, HELEN
Address C/O LITTLE RIVER COMMUNITY
 CENTER
 7900 NW 27TH AVE. STE E233/TTWM
City-State-Zip: MIAMI FL 33147

Title SECRETARY, DIRECTOR
Name SHUFORD, LORNA
Address C/O LITTLE RIVER COMMUNITY
 CENTER
 7900 NW 27TH AVE. STE E233/TTWM
City-State-Zip: MIAMI FL 33147

Title TREASURER, DIRECTOR
Name JEUNE, JEAN R JR.
Address C/O LITTLE RIVER COMMUNITY
 CENTER
 7900 NW 27TH AVE. STE E233/TTWM
City-State-Zip: MIAMI FL 33147

Title VP, DIRECTOR
Name EVERETT, WILLIE B JR.
Address C/O LITTLE RIVER COMMUNITY
 CENTER
 7900 NW 27TH AVE. STE E233/TTWM
City-State-Zip: MIAMI FL 33147

Title OTHER, HAITI
Name REFUSE, MAXO
Address C/O LITTLE RIVER COMMUNITY
 CENTER
 7900 NW 27TH AVE. STE E233/TTWM
City-State-Zip: MIAMI FL 33147

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: MIRLANDE DINA M MICHEL

P. D.

05/02/2014

Electronic Signature of Signing Officer/Director Detail

Date