

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000007408

Entity Name: SEND ME MINISTRIES, INC.**Current Principal Place of Business:**3520 SAVANNA PALMS CT
LAKEWOOD RANCH, FL 34211**Current Mailing Address:**3520 SAVANNA PALMS CT
LAKEWOOD RANCH, FL 34211 US**FEI Number:** 47-1531787**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LUCE, BRANDON
3520 SAVANNA PALMS CT
LAKEWOOD RANCH, FL 34211 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	PRESIDENT
Name	LUCE, BRANDON
Address	3520 SAVANNA PALMS CT
City-State-Zip:	LAKEWOOD RANCH FL 34211

Title	SECRETARY
Name	LUCE, SARAH
Address	3520 SAVANNA PALMS CT
City-State-Zip:	LAKEWOOD RANCH FL 34211

Title	VP
Name	GOMEZ, OCTAVIO
Address	3520 SAVANNA PALMS CT
City-State-Zip:	LAKEWOOD RANCH FL 34211

Title	OFFICER
Name	WILLIAMS, MARK
Address	3520 SAVANNA PALMS CT
City-State-Zip:	LAKEWOOD RANCH FL 34211

Title	PASTOR
Name	MOORE, MATT
Address	3520 SAVANNA PALMS CT
City-State-Zip:	LAKEWOOD RANCH FL 34211

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 LUCE**PRESIDENT****01/24/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date