

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000001366

Entity Name: BROKEN WINGS MINISTRY, INC.**Current Principal Place of Business:**6900 TAVISTOCK LAKES BLVD
SUITE 400
ORLANDO, FL 32827**Current Mailing Address:**10524 MOSS PARK ROAD
SUITE 204-768
ORLANDO, FL 32823 US**FEI Number:** 47-3272931**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CARVALHO, TAMMY
10524 MOSS PARK ROAD
SUITE 204-768
ORLANDO, FL 32823 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 CEO
Name CARVALHO, TAMMY M
Address 10524 MOSS PARK ROAD
SUITE 204-768
City-State-Zip: ORLANDO FL 32823

Title BOARD CHAIR
Name FORESTIERI, MARNIE
Address 10524 MOSS PARK ROAD
SUITE 204-768
City-State-Zip: ORLANDO FL 32823

Title VICE PRESIDENT/ CFO
Name CARVALHO, NORMAN F
Address 10524 MOSS PARK ROAD
SUITE 204-768
City-State-Zip: ORLANDO FL 32823

Title OTHER
Name GOMEZ CORDERO, MARIBEL
Address 10524 MOSS PARK ROAD
SUITE 204-768
City-State-Zip: ORLANDO FL 32823

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: TAMMY CARVALHO

CEO

01/23/2020

Electronic Signature of Signing Officer/Director Detail

Date