

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N16000008989

**FILED**  
**Feb 14, 2017**  
**Secretary of State**  
**CC8692591384**

**Entity Name:** FROM THE GROUND UP MINISTRIES, INC.

**Current Principal Place of Business:**

106 HANCOCK BRIDGE PKWY  
SUITE D-15 #541  
CAPE CORAL, FL 33991

**Current Mailing Address:**

106 HANCOCK BRIDGE PKWY  
SUITE D-15 #541  
CAPE CORAL, FL 33991 US

**FEI Number: 81-3766503**

**Certificate of Status Desired: No**

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

NORTHROP FINANCIAL GROUP, LLC  
13700 SIX MILE CYPRESS PKWY., STE. 2  
FORT MYERS, FL 33912 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 HAMM, JAMES  
Address 106 HANCOCK BRIDGE PKWY  
SUITE D-15 #541  
City-State-Zip: CAPE CORAL FL 33991

Title VP  
Name HAMM, DAWN  
Address 106 HANCOCK BRIDGE PKWY  
SUITE D-15 #541  
City-State-Zip: CAPE CORAL FL 33991

Title S  
Name HOLBROOK, ALLISON  
Address 2908 51ST ST SW  
City-State-Zip: LEHIGH ACRES FL 33976

Title T  
Name RENTERIA, IRENE  
Address 101 NE 10TH AVE  
City-State-Zip: CAPE CORAL FL 33909

Title D  
Name LOTTO, DENNIS  
Address 275 HEIMANN ROAD  
City-State-Zip: LATROBE PA 15650

*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: JAMES HAMM**

**P**

**02/14/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date