

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16140

Entity Name: ALDRIDGE FAMILY MINISTRIES, INC.**Current Principal Place of Business:**1530 WOODCROFT DR.
FORT MILL, SC 29708**Current Mailing Address:**1530 WOODCROFT DR.
FORT MILL, SC 29708 US**FEI Number:** 59-2734013**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ALDRIDGE, SILAS B
10676 MARVIN E. JONES BLVD
DOWLING PARK, FL 32060 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	DIRECTOR
Name	ALDRIDGE, SILAS B
Address	10676 MARVIN E JONES BLVD CAMELLIA COURT 5304
City-State-Zip:	DOWLING PARK FL 32060

Title	VP, SECRETARY, TREASURER, DIRECTOR
Name	ALDRIDGE, RONALD B
Address	1530 WOODCROFT DR.
City-State-Zip:	FT. MILL SC 29708

Title	DIRECTOR
Name	JOHNSON, BOB
Address	3227 WISEMAN DRIVE
City-State-Zip:	CHARLOTTE NC 28227

Title	PRESIDENT, DIRECTOR
Name	ALDRIDGE, SARA E
Address	1530 WOODCROFT DR.
City-State-Zip:	FORT MILL SC 29708

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: RONALD B ALDRIDGE**DIRECTOR****04/21/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date