

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17000004994

Entity Name: IDENTIFY MINISTRIES,INC.

Current Principal Place of Business:

17722 SOUTHWEST 15TH AVENUE
NEWBERRY, FL 32669

Current Mailing Address:

P.O. BOX 1343
TRENTON, FL 32693 US

FEI Number: 82-1510808

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
476 RIVERSIDE AVE.
JACKSONVILLE, FL 32202 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 EXECUTIVE DIRECTOR/ PASTOR
Name PAUL, DEREK
Address 6785 SW SR 26
City-State-Zip: TRENTON FL 32693

Title TREASURER
Name PAUL, JULIE
Address 6785 SW SR 26
City-State-Zip: TRENTON FL 32693

Title SECRETARY
Name VALENCIA, YERANIA
Address 3510 NW 91ST ST.
APT.181
City-State-Zip: GAINESVILLE FL 32606

Title BOARD PRESIDENT
Name DIAMOND, CAMERON
Address 25145 NW 5TH AVE.
City-State-Zip: NEWBERRY FL 32669

Title BOARD MEMBER
Name FISHER, SHERRILL
Address 9966 SW 19TH LN.
City-State-Zip: GAINESVILLE FL 32607

Title BOARD MEMBER
Name CALLAWAY, JAY
Address 17820 NW 177TH AVE.
City-State-Zip: ALACHUA FL 32615

Title BOARD MEMBER
Name POLVERINO, DOMINIC
Address 3551 SAN PABLO RD. SOUTH
APT.#2907
City-State-Zip: JACKSONVILLE FL 32224

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: DEREK PAUL

**EXECUTIVE DIRECTOR & 01/12/2024
PASTOR**

Electronic Signature of Signing Officer/Director Detail

Date