	04/1
e above named entity submits this statement for the purpose of changing its registered office or registe	<b>0</b> ., .
IGNATURE: SUZETTE WALTERS MURRAY	
Electronic Signature of Registered Agent	E
fficer/Director Detail :	
tle PRESIDENT Title	S
ame WALTERS MURRAY, SUZETTE Name	DENNIS, NORMA
ddress 4535 N. PINE ISLAND RD. Address	4535 N. PINE ISLAND RD. SUNRISE,
ity-State-Zip: SUNRISE FL 33351	FL 33351 US
City-State-Zip:	SUNRISE FL 33351

SUNRISE, FL 33351

4535 N. PINE ISLAND RD.

DOCUMENT# N17000010870

#### **Current Mailing Address:**

4535 N. PINE ISLAND RD. SUNRISE, FL 33351 US

### FEI Number: 82-3354401

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

WALTERS MURRAY, SUZETTE 4535 N SUNR

Т

HOLINESS, ANDREA

SUNRISE FL 33351

4535 N. PINE ISLAND RD.

Title

Name

Address

City-State-Zip:

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: SUZETTE WALTERS MURRAY

Electronic Signature of Signing Officer/Director Detail

PRESIDENT.

04/15/2023 Date

FILED Apr 15, 2023 Secretary of State 2233691272CC

> 04/15/2023 Date

Certificate of Status Desired: No

## 2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

# Entity Name: TIME MINISTRIES INTERNATIONAL INC.

**Current Principal Place of Business:**