

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18000006290

Entity Name: PALM-CEDAR MINISTRIES, INC.**Current Principal Place of Business:**5557 HILL LANE
MARIANNA, FL 32448-7553**Current Mailing Address:**5557 HILL LANE
MARIANNA, FL 32448-7553 US**FEI Number: 83-0905762****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**HOLMES, JAMES D
5557 HILL LANE
MARIANNA, FL 32448-7553 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	PD
Name	HOLMES, JAMES D
Address	10800 ALPHARETTA HWY SUITE 208 519
City-State-Zip:	ROSWELL GA 30076

Title	VPD
Name	HOLMES, DEBROAH R
Address	19280 NE SR 69
City-State-Zip:	BLOUNTSTOWN FL 32424

Title	DIRECTOR
Name	STRONG, DOROTHY
Address	1402 WILLIAMS ST
City-State-Zip:	VALDOSTA GA 31602

Title	DT
Name	SPINK, JANET
Address	5571 HILL LANE
City-State-Zip:	MARIANNA FL 32448

Title	D
Name	STRANG, ROBERT
Address	44 BLUEBIRD WAY
City-State-Zip:	BURLISON TN 38015

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 D HOLMES**PRESIDENT****05/15/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date