## 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18000010775

Entity Name: GIFT'D MINISTRIES INC

**Current Principal Place of Business:** 

14223 PIMBERTON DR HUDSON, FL 34667

**Current Mailing Address:** 

P.O BOX 612

TARPON SPRINGS, FL 34688 US

FEI Number: 83-2479879 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TOWLES, AISHA M 14223 PIMBERTON DR HUDSON, FL 34667 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: AISHA TOWLES 08/02/2024

Electronic Signature of Registered Agent

Officer/Director Detail:

City-State-Zip:

HUDSON FL 34667

Title EXECUTIVE SECRETARY Title COO

Name ALLEN, ELAINA L Name CARD, ROBERT E III

Address 11011 AVANA WAY Address PO BOX 612

302

City-State-Zip: TARPON SPRINGS FL 34688

Title CEO

Name CARD, PRINCESS ASTAR B

Name TOWLES, AISHA M

Address 14223 PIMBERTON DR.

Address PO BOX 612 City-State-Zip: HUDSON FL 34667

City-State-Zip: TARPON SPRINGS FL 34688

Title ASST, SECRETARY

 Title
 DIRECTOR
 Name
 CARD, MARIAH

 Name
 JOHNSON, TORI
 Address
 PO BOX 612

Address 562 JACOB CLOSE City-State-Zip: TARPON SPRINGS FL 34652

City-State-Zip: GAHANNA OH 43230

Title OTHER
Title DIRECTOR

Name DESANTIS, JENNIFER Name CHERRAE, BLACKWELL

Address PO BOX 612
Address 12810 HONEYBROOK DR.

Address 12810 HONEYBROOK DR. City-State-Zip: TARPON SPRINGS FL

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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: AISHA M. TOWLES CEO 08/02/2024

Electronic Signature of Signing Officer/Director Detail

Date

FILED Aug 02, 2024

**Secretary of State** 

5544476285CC

Date

## Officer/Director Detail Continued:

Title DIRECTOR

Name ANIGO, PRISCILLA

Address UGANDA
City-State-Zip: SOROTI FL

ony diana zip. Gonton 12

Title DIRECTOR
Name VIKEN, JACKOB

Address KENYA
City-State-Zip: KISII FL

Title DIRECTOR

Name BASHARAT, STEPHNESS

Address PAKISTAN

City-State-Zip: FAISALABAD FL