

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N19000006647

**Entity Name:** A ROYAL PRIESTHOOD MINISTRIES, INC.

**FILED**  
**Apr 07, 2023**  
**Secretary of State**  
**8290804770CC**

**Current Principal Place of Business:**

1380 NE MIAMI GARDENS DRIVE  
SUITE 250  
MIAMI, FL 33179

**Current Mailing Address:**

1380 NE MIAMI GARDENS DRIVE  
SUITE 250  
MIAMI, FL 33179 US

**FEI Number: 85-0771002**

**Certificate of Status Desired: Yes**

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

BRILLANT, VANESSA A  
16830 NE 8 CT  
MIAMI, FL 33162 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 PCEO  
Name BRILLANT, VANESSA A  
Address 1380 NE MIAMI GARDENS DR, STE 250  
City-State-Zip: NORTH MIAMI BEACH FL 33179

Title VP/T  
Name BRILLANT, AMANDA N  
Address 1380 NE MIAMI GARDENS DR 250  
City-State-Zip: MIAMI FL 33179

Title S  
Name ELLIS, SHANTEL  
Address 1380 NE MIAMI GARDENS DR 250  
City-State-Zip: MIAMI FL 33179

Title D  
Name BARBOT, LOUIS M  
Address 1380 NE MIAMI GARDENS DR 250  
City-State-Zip: MIAMI FL 33179

Title D  
Name HARRIS, SUSAN L  
Address 1380 NE MIAMI GARDENS DR 250  
City-State-Zip: MIAMI FL 33179

Title D  
Name MARKS, MITCHELL  
Address 1380 MIAMI GARDENS DR 250  
City-State-Zip: MIAMI FL 33179

*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: VANESSA A BRILLANT**

**PRESIDENT/CEO**

**04/07/2023**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date