

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

DOCUMENT# N21000012980

**Entity Name:** R.E.F.U.G.E. APOSTOLIC MINISTRIES INC.

**Current Principal Place of Business:**

684 OCEAN SPRAY DR  
RUSKIN, FL 33570

**Current Mailing Address:**

684 OCEAN SPRAY DR  
RUSKIN, FL 33570 US

**FEI Number: 87-3562929**

**Certificate of Status Desired: Yes**

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

WASHINGTON, TEVIN  
684 OCEAN SPRAY DR  
RUSKIN, FL 33570 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 P  
Name WASHINGTON, TEVIN  
Address 684 OCEAN SPRAY DR  
City-State-Zip: RUSKIN FL 33570

Title VP  
Name WASHINGTON, ARIEL  
Address 684 OCEAN SPRAY DR  
City-State-Zip: RUSKIN FL 33570

Title BOD  
Name WASHINGTON, FELECIA  
Address 684 OCEAN SPRAY DR  
City-State-Zip: RUSKIN FL 33570

Title BOD  
Name SAUNDERS, JAYLAH  
Address 684 OCEAN SPRAY DR  
City-State-Zip: RUSKIN FL 33570

Title BOD  
Name WASHINGTON, JA'NIYAH  
Address 684 OCEAN SPRAY DR  
City-State-Zip: RUSKIN FL 33570

Title BOD  
Name SHAMBLEE, DAREK JOSEPH  
Address 7145 BELLAIRE TERRACE  
City-State-Zip: NEW PORT RICHEY FL 34653

Title BOD  
Name SHAMBLEE, JACQUELINE  
Address 7145 BELLAIRE TERRACE  
City-State-Zip: NEW PORT RICHEY FL 34653

Title BOD  
Name SHAMBLEE, JOSEPH PIERRE  
Address 7145 BELLAIRE TERRACE  
City-State-Zip: NEW PORT RICHEY FL 34653

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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: TEVIN WASHINGTON**

**PRESIDENT**

**04/28/2023**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title            BOD  
Name            SHAMBLEE, EVERLY GRACE  
Address        7145 BELLAIRE TERRACE  
City-State-Zip: NEW PORT RICHEY FL 34653