

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N47620

**Entity Name:** BROTHERLY LOVE MINISTRIES OF PINE HILLS,  
INCORPORATED

**Current Principal Place of Business:**

6225 CLARCONA OCOEE RD  
ORLANDO, FL 32810

**Current Mailing Address:**

P.O. BOX 680621  
ORLANDO, FL 32868-0621 US

**FEI Number:** 59-2987125

**Certificate of Status Desired:** No

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

SIMS, ARTHUR D., SR.  
7008 CHARINGMOOR CT  
ORLANDO, FL 32818 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 SIMS, ARTHUR DSR.  
Address 7008 CHARINGMOOR COURT  
City-State-Zip: ORLANDO FL 32818

Title VD  
Name BATCHELOR, HARVEY L  
Address 1840 CROWN POINT WOODS  
City-State-Zip: OCOEE FL

Title TD  
Name FLOWERS, THERESA  
Address 6419 RUTHIE DRIVE  
City-State-Zip: ORLANDO FL 32818

Title D  
Name SMITH, JOYCE  
Address 2863 RAVENAL AVENUE  
City-State-Zip: ORLANDO FL 32811

*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: HARVEY L. BATCHELOR

VICE PRESIDENT

04/21/2014

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

\_\_\_\_\_  
Date