

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001307

Entity Name: ACTS MINISTRIES, INC.**Current Principal Place of Business:**3150 DUNDEE RD
WINTER HAVEN, FL 33884**Current Mailing Address:**PO BOX 1758
WINTER HAVEN, FL 33882**FEI Number:** 59-3303480**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**GAY, ALONZO TSR. DR.
3150 DUNDEE ROAD
WINTER HAVEN, FL 33884 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:** DR. ALONZO T. GAY, SR.

02/06/2013

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P
Name	GAY, ALONZO TSR DR.
Address	P O BOX 1758
City-State-Zip:	WINTER HAVEN FL 33882

Title	T
Name	MAGGARD, CATHERINE A
Address	P O BOX 532
City-State-Zip:	LAKE WALES FL 33859

Title	D
Name	GRIMMER, BETTYE
Address	4377 MANDOLYN BLVD
City-State-Zip:	WINTER HAVEN FL 33884

Title	VP
Name	GAY, SANDRA R DR.
Address	955 BEARCREEK DR.
City-State-Zip:	BARTOW FL 33830

Title	SECRETARY
Name	WELLS, BARBARA
Address	P O BOX 1853
City-State-Zip:	WINTER HAVEN FL 33882

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: DR. ALONZO T. GAY, SR.

PRESIDENT

02/06/2013

Electronic Signature of Signing Officer/Director Detail

Date