

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N97000004605

**Entity Name:** HEART OF THE BRIDE MINISTRIES, INC.**Current Principal Place of Business:**111 BAILEY DR STE 1  
NICEVILLE, FL 32578**Current Mailing Address:**P.O. BOX 786  
NICEVILLE, FL 32588**FEI Number:** 74-2848196**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GIBSON, TONY LJR.  
707 JUNIPER AVENUE  
NICEVILLE, FL 32578 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	D
Name	SPEEGLE, TROY
Address	995 SIXTEENTH GREEN
City-State-Zip:	NICEVILLE FL 32578

Title	S
Name	GIBSON, FAITH L
Address	707 JUNIPER AVENUE
City-State-Zip:	NICEVILLE FL 32578

Title	T
Name	LOWMILLER, BRUCE
Address	104 AUCILLA AVENUE
City-State-Zip:	VALPARAISO FL 32580

Title	P
Name	GIBSON, TONY L
Address	707 JUNIPER AVENUE
City-State-Zip:	NICEVILLE FL 32578

Title	D
Name	HOWELL, SUSAN
Address	2917 SANDPIPER COVE
City-State-Zip:	NAVARRE FL 32566

Title	D
Name	JONATHAN, OCHS
Address	1266 LAURA LANE
City-State-Zip:	NICEVILLE FL 32578

*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: FAITH L. GIBSON****SEC****04/10/2013**

Electronic Signature of Signing Officer/Director Detail

Date