# 2015 FLORIDA NOT FOR PROFIT CORPORATION AMENDED 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

Name and Address of Current Registered Agent:

GIBSON, TONY LJR. 1545 TEXAS PARKWAY CRESTVIEW, FL 32536 US Jul 28, 2015 Secretary of State CC0149193482

FILED

Certificate of Status Desired: No

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

# **Officer/Director Detail :**

Title	DIRECTOR	Title	DIRECTOR	
Name	GIBSON, TONY L	Name	GIBSON, FAITH L	
Address	1545 TEXAS PARKWAY	Address	1545 TEXAS PARKWAY	
City-State-Zip:	CRESTVIEW FL 32536	City-State-Zip:	CRESTVIEW FL 32536	
Title	DIRECTOR	Title	TREASURER	
Name	HOWELL, SUSAN	Name	JONATHAN, OCHS	
Address	2917 SANDPIPER COVE	Address	1266 LAURA LANE	
City-State-Zip:	NAVARRE FL 32566	City-State-Zip:	NICEVILLE FL 32578	
Title	SECRETARY	Title	CHAIRMAN	
Title Name	SECRETARY WEST, JAN	Title Name	CHAIRMAN CARTER, RYAN	
Name	WEST, JAN	Name	CARTER, RYAN 5637 PROMISED LAND DRIVE	
Name Address	WEST, JAN 6410 SEQUOIA DRIVE	Name Address	CARTER, RYAN 5637 PROMISED LAND DRIVE	
Name Address City-State-Zip:	WEST, JAN 6410 SEQUOIA DRIVE MIDLAND TX 79707	Name Address City-State-Zip:	CARTER, RYAN 5637 PROMISED LAND DRIVE BAKER FL 32531	
Name Address City-State-Zip: Title	WEST, JAN 6410 SEQUOIA DRIVE MIDLAND TX 79707 DIRECTOR	Name Address City-State-Zip: Title	CARTER, RYAN 5637 PROMISED LAND DRIVE BAKER FL 32531 DIRECTOR	
Name Address City-State-Zip: Title Name	WEST, JAN 6410 SEQUOIA DRIVE MIDLAND TX 79707 DIRECTOR CRISMAN, BRIAN 134 TRANQUILITY DRIVE	Name Address City-State-Zip: Title Name	CARTER, RYAN 5637 PROMISED LAND DRIVE BAKER FL 32531 DIRECTOR MOORE, BRYCE	

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: TONY L GIBSON

DIRECTOR

07/28/2015

Date

Electronic Signature of Signing Officer/Director Detail

Date