

# F190000004229

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

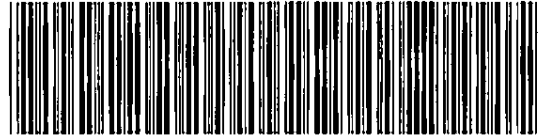
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(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

\*Michael gave  
permission to  
correct the  
name

Office Use Only



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2019 SEP 13 PM 2:16

RECEIVED

B KINSEY  
SEP 17 2019



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 29, 2019

MIKE MORREALE  
921 FAITH CIRCLE EAST, LOT 46  
BRADENTON, FL 34212

SUBJECT: MIKE MORREALE MINISTRIES INCORPORATED  
Ref. Number: W19000079949

We have received your document for MIKE MORREALE MINISTRIES INCORPORATED and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

REMOVE "INCORPORATED" FROM LINE #1. ON THE ALTERNATE NAME LINE, PLACE THE NAME EXACTLY HOW IT IS ON THE CERTIFICATE OF EXISTENCE, ALONG WITH A CORPORATE SUFFIX,

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Brooke N Kinsey  
Regulatory Specialist II

Letter Number: 919A00017950

**RECEIVED**  
SEP 13 2019

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Mike Morreale Ministries Incorporated  
Name of Corporation – must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

Rev. Mike Morreale

Name of Person

Mike Morreale Ministries Incorporated

Firm/Company

921 Faith Circle East, Lot 46

Address

Bradenton, Florida 34212

City/State and Zip Code

brushgp@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rev. Michael Morreale

Name of Person

970  
at ( )  
Area Code

380-2998

Daytime Telephone Number

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$70.00 Filing Fee

☐ \$78.75 Filing Fee &  
Certificate of Status

☐ \$78.75 Filing Fee &  
Certified Copy

☒ \$87.50 Filing Fee,  
Certificate of Status &  
Certified Copy

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO  
CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN  
THE STATE OF FLORIDA:

1. Mike Morreale Ministries **INCORPORATED**

(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Michigan 3. 38-3582381  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 6/6/2001 5. perpetual  
(Date of Incorporation) (Date of duration, if other than perpetual)

6. \_\_\_\_\_  
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 921 Faith Circle East, Lot 46, Bradenton, Florida 34212  
(Principal office street address)

Same  
(Current mailing address, if different)

8. Continuing to operate in a faith based ministry outreach to poverty as well as special needs individuals.  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)

Name: Melissa Kaye Morreale

Office Address: 921 Faith Circle East, Lot 46  
Bradenton, Florida 34212  
(City) (Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Melissa Morreale  
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

FILED  
2019 SEP 13 PM 2:16

12. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

**A. DIRECTORS**

☐ Chairman Name: Rev. Mike Morreale  
☐ Vice Chairman Address: 921 Faith Circle East  
☐ Director Bradenton, Florida 34212  
☒ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

☐ Chairman Name: Rev. Melissa Morreale  
☐ Vice Chairman Address: 921 Faith Circle East  
☒ Director Bradenton, Florida 34212  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

☐ Chairman Name: Pastor Brandon Meredith  
☒ Vice Chairman Address: 801 S. West Street,  
☐ Director #17  
☐ President Fort Morgan, Colorado 80701  
☒ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

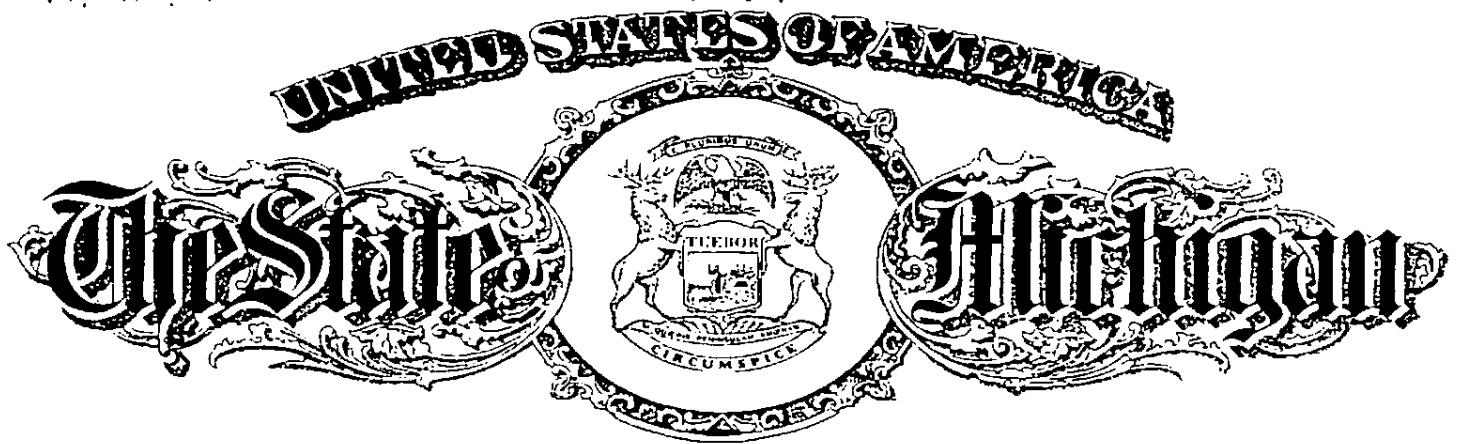
☐ Chairman Name: Rev. Paul Baker  
☐ Vice Chairman Address: 315 Edison  
☐ Director Brush, Colorado 80723  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☒ Secretary ☐ Treasurer  
☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

NOTE: Important Notice: Use only one report more than six (6). The attachment will be imaged for reporting purposes only. No other attachments are to be included in the Department of State Annual Report form.

13. Rev. Mike Morreale (Typed or printed name and capacity of person signing application)

14. Rev. Mike Morreale President  
(Typed or printed name and capacity of person signing application)



Department of Licensing and Regulatory Affairs

Lansing, Michigan

*This is to Certify That*

**MIKE MORREALE MINISTRIES**

*was validly Incorporated on February 7, 2001 as a Michigan nonprofit corporation, and said corporation is validly in existence under the laws of this state.*

*This certificate is issued pursuant to the provisions of 1982 PA 162 to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to conduct affairs in Michigan and for no other purpose.*

*This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.*

*In testimony whereof, I have hereunto set my hand,  
in the City of Lansing, this 13th day of August, 2019.*

Julia Dale, Director

Corporations, Securities & Commercial Licensing Bureau