

F21000004467

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

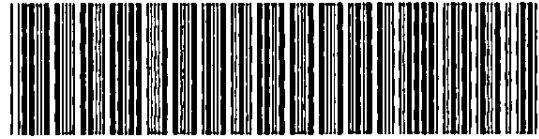
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CLERK OF STATE
TALLAHASSEE, FLORIDA

96939
-16m

7/5/21

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NEAL MINISTRIES INTERNATIONAL

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:

ANGELA NEAL

Name of Person

NEAL MINISTRIES INTERNATIONAL

Firm/Company

10011 GEESE TRAIL CIRCLE

Address

SUN CITY CENTER, FL 33573

City/State and Zip Code

prayers@nealministriesinternational.church

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

For further information concerning this matter, please call:

ANGELA NEAL

at (813) 566-2157

Name of Person

Area Code

Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 7, 2021

ANGELA NEAL
10011 GEESE TR CIR
SUN CITY CENTER, FL 33573

SUBJECT: NEAL MINISTRIES INTERNATIONAL
Ref. Number: W21000096939

We have received your document for NEAL MINISTRIES INTERNATIONAL and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 121A00015457

**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. NEAL MINISTRIES INTERNATIONAL

(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.)

NEAL MINISTRIES INTERNATIONAL FL "CORPORATION"

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

2. TN 3. 46-4967228
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. _____ 5. _____
(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. 10011 GEESE TRAIL CIRCLE, SUN CITY CENTER, FL 33573
(Principal office street address)

10011 GEESE TRAIL CIRCLE, SUN CITY CENTER, FL 33573
(Current mailing address, if different)

8. A church, a religious Christian organization for spiritual growth, food & provisions for the homeless & families in need.
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

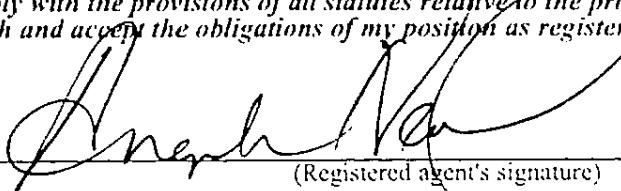
9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)

Name: ANGELA NEAL

Office Address: 10011 GEESE TRAIL CIRCLE
SUN, Florida _____
(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.


(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.

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21 AUG - 4 PM 3:34
CLERK OF STATE
TALLAHASSEE, FLORIDA

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: ANGELA NEAL
☐ Vice Chairman Address: 10011 GEESE TRAIL CIRCLE
☐ Director SUN CITY CENTER, FL 33573
☒ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: CARLLOS NEAL
☐ Vice Chairman Address: 10011 GEESE TRAIL CIRCLE
☐ Director SUN CITY CENTER, FL 33573
☐ President _____
☐ Vice President _____
☒ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: ANTHONY MOORE JR.
☐ Vice Chairman Address: 10011 GEESE TRAIL CIRCLE
☐ Director SUN CITY CENTER, FL 33573
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other: MANAGER ☐ Other: _____

☐ Chairman Name: HASNINA JONES
☐ Vice Chairman Address: 10011 GEESE TRAIL CIRCLE
☐ Director SUN CITY CENTER, FL 33573
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other: MANAGER ☐ Other: _____

☐ Chairman Name: EZRA NEAL
☐ Vice Chairman Address: 10011 GEESE TRAIL CIRCLE
☐ Director SUN CITY CENTER, FL 33573
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other: COORDINATOR ☐ Other: _____

☐ Chairman Name: SEAN-ALLEN NEAL
☐ Vice Chairman Address: 10011 GEESE TRAIL CIRCLE
☐ Director SUN CITY CENTER, FL 33573
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other: COORDINATOR ☐ Other: _____

NOTE: Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

13. Angela Neal (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Angela Neal (President) (Typed or printed name and capacity of person signing application)



Tre Hargett
Secretary of State

Division of Business Services
Department of State
State of Tennessee
312 Rosa L. Parks AVE, 6th Fl.
Nashville, TN 37243-1102

ANGELA NEAL
TRACY L LEMIEUX
10011 GEESE TRAIL
SUN CITY CENTER, FL 33573

August 2, 2021

Request Type: Certificate of Existence/Authorization
Request #: 0429246

Issuance Date: 08/02/2021
Copies Requested: 1

Document Receipt

Receipt #: 006541637

Filing Fee: \$20.00

Payment-Credit Card - State Payment Center - CC #: 3811555716

\$20.00

Regarding: Neal Ministries International
Filing Type: Nonprofit Corporation - Domestic
Formation/Qualification Date: 07/02/2014
Status: Active
Duration Term: Perpetual
Business County: SHELBY COUNTY

Control #: 763205
Date Formed: 07/02/2014
Formation Locale: TENNESSEE
Inactive Date:

CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

Neal Ministries International

- * is a Corporation duly incorporated under the law of this State with a date of incorporation and duration as given above;
- * has paid all fees, interest, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business;
- * has filed the most recent annual report required with this office;
- * has appointed a registered agent and registered office in this State;
- * has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Tre Hargett
Secretary of State

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