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TO:

Amendment Section Division of Corporations

SUBJECT: Turning Hearts Ministries Inc	
Name of Corporation	
DOCUMENT NUMBER: N000000008177	
The enclosed Statement of Change of Registere	d Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this	s matter to the following:
Theresa A. Kite	
Name of Contact Person	
Turning Hearts Ministries Inc	
Firm/Company	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
5381 Quarry Rock Road	
Address	. 7
Lakeland, FL 33809	
City/State and Zip Code	
takite88@aol.com	
E-mail address: (to be used for future annua	I report notification)
	$ar{ar{arepsilon}}$
For further information concerning this matter,	please call:
Theresa A. Kite	at (813 \ \625-3733
Name of Contact Person	at (813)625-3733 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the	Department of State.
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045 (04/13)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	G C 50	registered agent, or both, in the State of Florida.	
1. The name of	the corporation: Turning Hearts Min	istries Inc	
2. The principa	l office address: 5381 Quarry Rock Ro	oad Lakeland, FL 33809	
3. The mailing	address (if different): P.O. Box 2805	25 Tampa, FL 33682	
		Document number: N00000008177	
	d street address of the current register furtment of State: (If resigned, enter re	ered agent and registered office on file with the esigned)	
	Theresa A. Kite Vice President		
	1257 Andora Falls St		
	Tampa, FL 33619		
6. The name an (if changed):		d agent (if changed) and /or registered office	On all I
	Theresa A. Kite Vice President		. 5
	5381 Quarry Rock Road		
		P.O. Box NOT acceptable	
	Lakeland FL 33809		.)
The street addras changed wil	ress of its registered office and the s	street address of the business office of its regis	tered agent
Such change wanthorized by	as authorized by resolution duly ache board, or the corporation has be	dopted by its board of directors or by an officer en notified in writing of the change.	
Seronce	M. Kite	Jerome M. Kite Pastor, President	
•	ure of an oblicer or director	Printed or typed name and title	
I hereby accep I further agree of my duties, a document is be corporation ha	t the appointment as registered age to comply with the provisions of al nd I am familiar with and accept th ing filed merely to reflect a change is been notified in writing of this ch	ent and agree to act in this capacity. Il statutes relative to the proper and complete pare se obligation of my position as registered agent on the registered office address, I hereby conf ange.	performanc t. Or, if thi îrm that the
	2. R. Kite	August 9th, 2020	
Si	gnature of Registered Agent	Date	
If signing on b	chalf of an entity:		
Theresa A. Kite	Vice President		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Typed or Printed Name		

* * * FILING FEE: \$35.00 * * *