

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000005089

**FILED**  
**Mar 03, 2011**  
**Secretary of State**

**Entity Name:** ALLEN GRIFFIN MINISTRIES, INC.

**Current Principal Place of Business:**

1687 WEST GRANADA BLVD  
ORMOND BEACH, FL 32174

**New Principal Place of Business:**

**Current Mailing Address:**

1687 WEST GRANADA BLVD  
ORMOND BEACH, FL 32174

**New Mailing Address:**

**FEI Number:** 65-1122731

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LEEYEE, ADELBERT  
12430 NE 2ND COURT  
NORTH MIAMI, FL 33161 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** GRIFFIN, ALLEN  
**Address:** 149 PERFECT DRIVE  
**City-St-Zip:** DAYTONA BEACH, FL 32124

**Title:** VD  
**Name:** LEEYEE, ADELBERT  
**Address:** 12430 NE 2ND COURT  
**City-St-Zip:** NORTH MIAMI, FL 33161

**Title:** SD  
**Name:** MITCHELL, LESTER  
**Address:** 15863 NW 11TH ST  
**City-St-Zip:** PEMBROKE PINES, FL 33028

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:** ALLEN L GRIFFIN

PD

03/03/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date