

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008053

FILED
Mar 08, 2012
Secretary of State

Entity Name: GETHSEMANE MINISTRIES, INC.

Current Principal Place of Business:

835 SW 173RD AVE
PEMBROKE PINES, FL 33029

New Principal Place of Business:

Current Mailing Address:

835 SW 173RD AVE
PEMBROKE PINES, FL 33029

New Mailing Address:

FEI Number: 30-0135141

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRAVE, CONSTANT REV.
835 SW 173RD AVE
PEMBROKE PINES, FL 33029 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: CD
Name: BRAVE, CONSTANT REV.
Address: 1931 NW 188TH AVE.
City-St-Zip: PEMBROKE PINES, FL 33029

Title: PD
Name: BRAVE, EMITA
Address: 1931 NW 188TH AVE.
City-St-Zip: PEMBROKE PINES, FL 33029

Title: VPD
Name: BELANCOURT, MARIETTE
Address: 19362 NW 111TH ST
City-St-Zip: PEMBROKE PINES, FL 33029

Title: SD
Name: ST. SURIN, BEATRICE
Address: 5272 SW 152ND AVE
City-St-Zip: MIRAMAR, FL 33027

Title: VD
Name: ANDOU, ADOLPHE
Address: 6970 E. WEDGEWOOD AVE
City-St-Zip: DAVIE, FL 33331

Title: VD
Name: ST. SURIN, YVES
Address: 5272 SW 152ND AVE
City-St-Zip: MIRAMAR, FL 33027

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: CONSTANT BRAVE

CD

03/08/2012

Electronic Signature of Signing Officer or Director

Date