

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

DOCUMENT# N03000003819

**FILED**  
**Apr 26, 2011**  
**Secretary of State**

**Entity Name:** BAY OF THE HOLY SPIRIT MINISTRIES INTERNATIONAL INC

**Current Principal Place of Business:**

4142 MARINER BLVD  
SUITE 430  
SPRING HILL, FL 34609

**New Principal Place of Business:**

**Current Mailing Address:**

4142 MARINER BLVD  
SUITE 430  
SPRING HILL, FL 34609

**New Mailing Address:**

**FEI Number:** 59-3155815

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CIGANEK, PETER M RA  
4142 MARINER BLVD  
SUITE 430  
SPRING HILL, FL 34609 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: D  
Name: CIGANEK, PETER M  
Address: 4142 MARINER BLVD  
City-St-Zip: SPRING HILL, FL 34609

Title: D  
Name: NELSON, GREGORY V  
Address: 7609 PINE HILL DR  
City-St-Zip: TAMPA, FL 33617

Title: D  
Name: POWERS, MARY T  
Address: 8586 SOUTH CARR ST.  
City-St-Zip: LITTLETON, CO 80128

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: PETER M. CIGANEK

DIR

04/26/2011

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

\_\_\_\_\_  
Date