

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2004 8:00 am
Secretary of State

03-10-2004 90024 005 ****70.00

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1. Entity Name
TAKE IT TO THE STREET MINISTRIES, INC.



Principal Place of Business
**9214 EAST HIGHLAND PINES, BLVD.
PALM BEACH GARDENS, FL 33418**

Mailing Address
**9214 EAST HIGHLAND PINES, BLVD.
PALM BEACH GARDENS, FL 33418**

44016740



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02162004

Chg-NP

CR2E037 (10/03)

4. FEI Number

86-1061479

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

~~6. Name and Address of Current Registered Agent~~

~~7. Name and Address of New Registered Agent~~

**ROYER, ROGER
9214 EAST HIGHLAND PINES, BLVD.
PALM BEACH GARDENS, FL 33418**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DIR
ROYER, ROGER
9214 EAST HIGHLAND PINES BLVD.
PALM BEACH GARDENS, FL 33418** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DIR
DIMAIO, MICHAEL
9214 EAST HIGHLAND PINES BLVD.
PALM BEACH GARDENS, FL 33418** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
~~**DIR
BOXOLD, DAVID
9214 EAST HIGHLAND PINES BLVD.
PALM BEACH GARDENS, FL 33418**~~ ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DIR
PENN, MICHAEL
9214 EAST HIGHLAND PINES BLVD.
PALM BEACH GARDENS, FL 33418** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DIR
BROCKMAN, JASON
9214 EAST HIGHLAND PINES BLVD.
PALM BEACH GARDENS, FL 33418** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DIR
ARBOLAEZ, DANIEL
9214 EAST HIGHLAND PINES BLVD.
PALM BEACH GARDENS, FL 33418** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Roger Royer

ROGER ROYER

3/5/04

561-691-9067

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #