

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000002140

**FILED**  
**Apr 24, 2012**  
**Secretary of State**

**Entity Name:** FLAME OF FIRE FAITH MINISTRIES, INC

**Current Principal Place of Business:**

507 N 16TH STREET  
FORT PIERCE, FL 34947

**New Principal Place of Business:**

**Current Mailing Address:**

507 N 16TH STREET  
FORT PIERCE, FL 34947

**New Mailing Address:**

**FEI Number:** 59-3839704

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MC GEE, RUE L  
507 N 16TH STREET  
FORT PIERCE, FL 34947 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:** P  
**Name:** MC GEE, RUE L  
**Address:** 507 N 16TH STREET  
**City-St-Zip:** FORT PIERCE, FL 34947

**Title:** S  
**Name:** MC GEE, NICOLE  
**Address:** 2304 SAN MARCOS AVENUE  
**City-St-Zip:** FORT PIERCE, FL 34946

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:** RUE LANE MC GEE

P

04/24/2012

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

\_\_\_\_\_  
Date