

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000005471

FILED  
Jan 19, 2012  
Secretary of State

**Entity Name:** BROKEN BUT BEAUTIFUL MINISTRIES, INC.

**Current Principal Place of Business:**

13129 SHERMAN DR.  
HUDSON, FL 34667 US

**New Principal Place of Business:**

**Current Mailing Address:**

13129 SHERMAN DR.  
HUDSON, FL 34667 US

**New Mailing Address:**

**FEI Number:** 61-1568184

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KOLB, DANIEL M  
13129 SHERMAN DR  
HUDSON, FL 34667 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: KOLB, DAN M  
Address: 13129 SHERMAN DR  
City-St-Zip: HUDSON, FL 34667 US

Title: VP  
Name: KOLB, JULIE A  
Address: 13129 SHERMAN DR  
City-St-Zip: HUDSON, FL 34667 US

Title: T  
Name: FAVATA, MARY  
Address: 8010 SR 52 APT 309  
City-St-Zip: HUDSON, FL 34667 US

Title: S  
Name: KOLB, JULIE A  
Address: 13129 SHERMAN DR  
City-St-Zip: HUDSON, FL 34667 US

Title: D  
Name: HOPE, ROBERT H  
Address: 8322 BRENTWOOD ST  
City-St-Zip: WEEKI WACHEE, FL 34613

Title: D  
Name: RICHIE, JAKE  
Address: 7525 TYSON DR  
City-St-Zip: PORT RICHEY, FL 34668

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:** JULIE KOLB

VP

01/19/2012

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

\_\_\_\_\_  
Date