

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000006624

FILED  
Apr 03, 2012  
Secretary of State

**Entity Name:** GOD IN THE RAW MINISTRIES, INC.

**Current Principal Place of Business:**

2400 WARE DRIVE  
WEST PALM BEACH, FL 33409

**New Principal Place of Business:**

**Current Mailing Address:**

2400 WARE DRIVE  
WEST PALM BEACH, FL 33409

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

PEART, CHARMANE R DR.  
1511 40TH STREET  
WEST PALM BEACH, FL 33407      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: PEART, CHARMANE R DR.  
Address: 1511 40TH STREET  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: VP  
Name: GAYLE, GLENTON J BISHOP  
Address: 175 W 27TH STREET  
City-St-Zip: RIVIERA BEACH, FL 33404

Title: D  
Name: JAMES, NICOLA M  
Address: 212 N CHILLINGWORTH DRIVE  
City-St-Zip: WEST PALM BEACH, FL 33409

Title: T  
Name: BLAKE, SAMANTHA  
Address: 165 DOVE CIRCLE  
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: D  
Name: PEART, PETER L  
Address: 1511 40TH STREET  
City-St-Zip: WEST PALM BEACH, FL 33407

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: NICOLA JAMES

D

04/03/2012

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

\_\_\_\_\_  
Date