

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000010799

FILED  
Jan 27, 2011  
Secretary of State

**Entity Name:** BEYOND THE WALLS MINISTRIES-FLORIDA INC.

**Current Principal Place of Business:**

410 SE VOLTAIR TERRACE  
PORT ST. LUCIE, FL 34983

**New Principal Place of Business:**

**Current Mailing Address:**

410 SE VOLTAIR TERRACE  
PORT ST. LUCIE, FL 34983

**New Mailing Address:**

**FEI Number:** 27-3712950

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

CRICHLLOW, RUTH E  
410 SE VOLTAIR TERRACE  
PORT ST. LUCIE, FL 34983 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:** PD  
**Name:** CRICHLLOW, RUTH E  
**Address:** 410 SE VOLTAIR TERRACE  
**City-St-Zip:** PORT ST. LUCIE, FL 34983

**Title:** VD  
**Name:** ARNAIZ-CHIPOG, PATRICIA  
**Address:** 901 HICKORY STREET #108  
**City-St-Zip:** MELBOURNE, FL 32901

**Title:** SD  
**Name:** WILLIAMS, JULIA  
**Address:** 612 SE DEAN TER  
**City-St-Zip:** PORT ST. LUCIE, FL 34983

**Title:** TD  
**Name:** ANDERSON, PATRICE Y  
**Address:** 302 SW NATIVITY TER  
**City-St-Zip:** PORT ST. LUCIE, FL 34984

**Title:** D  
**Name:** ALJOE, SIMONE  
**Address:** 435 SE NOME DRIVE  
**City-St-Zip:** PORT ST. LUCIE, FL 34984

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:** RUTH CRICHLLOW

RA

01/27/2011

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

\_\_\_\_\_  
Date