

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000010799

FILED
Jan 06, 2012
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:

CRICHLow, 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: CRICHLow, 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: RUTHECRICHLow

PD

01/06/2012

Electronic Signature of Signing Officer or Director

Date