

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

DOCUMENT# N11000005866

**FILED**  
**Feb 13, 2012**  
**Secretary of State**

**Entity Name:** ROBIN MCCRAY MINISTRIES, INC.

**Current Principal Place of Business:**

690 W 34TH STREET  
RIVIERA BEACH, FL 33404 US

**New Principal Place of Business:**

**Current Mailing Address:**

690 W 34TH STREET  
RIVIERA BEACH, FL 33404 US

**New Mailing Address:**

**FEI Number:** 45-2464648

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCCRAY, ROBIN D  
690 W 34TH STREET  
RIVIERA BEACH, FL 33404 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:** MCCRAY, ROBIN  
**Address:** 690 W 34TH STREET  
**City-St-Zip:** RIVIERA BEACH, FL 33404 US

**Title:** VP  
**Name:** MCCRAY, TROY K SR.  
**Address:** 690 W 34TH STREET  
**City-St-Zip:** RIVIERA BEACH, FL 33404 US

**Title:** SECR  
**Name:** MCCRAY, JASMINE N  
**Address:** 10420 N. MCKINLEY DRIVE, APT 11314  
**City-St-Zip:** TAMPA, FL 33612 US

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:** ROBIN MCCRAY

P

02/13/2012

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

\_\_\_\_\_  
Date