

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N31015

**FILED**  
**Feb 22, 2010**  
**Secretary of State**

**Entity Name:** BRADFORD ECUMENICAL MINISTRIES, INC.

**Current Principal Place of Business:**

321 W. ANDREW ST.  
STARKE, FL 32091 US

**New Principal Place of Business:**

**Current Mailing Address:**

921 EAST CALL STREET  
STARKE, FL 32091 US

**New Mailing Address:**

**FEI Number:** 59-3011911

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HARDESTY, GARY W  
921 E CALL STREET  
STARKE, FL 32091 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: HAYES, STEVE PRES.  
Address: 101 VALLEY RD  
City-St-Zip: STARKE, FL 32091

Title: SD  
Name: HARDESTY, GARY W  
Address: 205 S LAKEWOOD DR  
City-St-Zip: STARKE, FL 32091

Title: TREA  
Name: JONES, VEAZIE E  
Address: 405 N CHURCH STREET  
City-St-Zip: STARKE, FL 32091

Title: DIR  
Name: ARLEY, MACRAE  
Address: 1517 BESSENT ROAD  
City-St-Zip: STARKE, FL 32091

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: VEAZIE E. JONES

TREA

02/22/2010

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

\_\_\_\_\_  
Date