

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2006 08:00 AM
Secretary of State

DOCUMENT # N95000003920

1. Entity Name
WINNING TEAM MINISTRIES, INC.



Principal Place of Business
**15705 NW 37 CT
OPA LOCKA, FL 33054**

Mailing Address
**15705 NW 37 CT
OPA LOCKA, FL 33054**



04052006 No Chg-NP CR2E037 (11/05)

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4. FEI Number
65-0610076

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**IRVING, DONALD JR.
15705 NW 37 CT
OPA LOCKA, FL 33054**

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when renewing)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PSD
NAME	IRVING, DONALD JR
STREET ADDRESS	15705 N.W. 37TH COURT
CITY-ST-ZIP	OPA LOCKA, FL 33054
TITLE	VTD
NAME	DAVIS, SHARON
STREET ADDRESS	19433 NW 79TH CT
CITY-ST-ZIP	PALM SPRINGS, FL 33015
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

1100000487345
04/22/06-80050-010 \$1.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Donald Irving Jr. DONALD IRVING, JR-PRESIDENT 4-5-06 (305)623 7815(H)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #