

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N98000003334

**FILED**  
**Feb 23, 2011**  
**Secretary of State**

**Entity Name:** HERBERT L. BOWENS MINISTRIES, INC.

**Current Principal Place of Business:**

361 N.W. 19TH COURT  
POMPANO BEACH, FL 33060

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1043  
POMPANO BEACH, FL 33061 US

**New Mailing Address:**

**FEI Number:** 65-0840784

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BOWENS, HERBERT L  
361 NW 19 COURT  
POMPANO BEACH, FL 33060 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: BOWENS, HERBERT L  
Address: 361 NW 19 COURT  
City-St-Zip: POMPANO BEACH, FL 33060

Title: SD  
Name: BOWENS, JOYCE A BOWENS  
Address: 361 NW 19 COURT  
City-St-Zip: POMPANO BEACH, FL 33060

Title: SD  
Name: MULKEY-DURHAM, CATINA  
Address: 5790 LAKESIDE DR. ,#1002  
City-St-Zip: MARGATE, FL 33063

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: HERBERT L. BOWENS

PD

02/23/2011

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

\_\_\_\_\_  
Date