

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 731019

**FILED
Apr 23, 2016
Secretary of State
CC4611415946**

Entity Name: THE MASTER'S TOUCH MINISTRY, INC.

Current Principal Place of Business:

4510 SOUTEL DRIVE
JACKSONVILLE, FL 32208

Current Mailing Address:

4510 SOUTEL DRIVE
JACKSONVILLE, FL 32208

FEI Number: 51-0188273

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WELLS, MICHAEL T
4510 SOUTEL DRIVE
JACKSONVILLE, FL 32208 US

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

Officer/Director Detail :

Title PDC
Name CAMPBELL, L. JOYCE
Address 9901 RIDGE BLVD.
City-State-Zip: JACKSONVILLE FL 32208

Title VD
Name LASTER-HUNTER, EDDIE
Address 11766 E. KINGFISHER LN
City-State-Zip: JACKSONVILLE FL

Title D
Name WELLS, MICHAEL T
Address 12564 BISCAYNE LAKE DRIVE
City-State-Zip: JACKSONVILLE FL 32218

Title SD
Name CHANEY, GINA R
Address 3825 MARLO STREET
City-State-Zip: JACKSONVILLE FL 32209

Title D
Name FORD, BRENDA
Address 2168 COLLEGE CIRCLE
City-State-Zip: JACKSONVILLE FL 32209

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: MICHAEL T. WELLS

**DIRECTOR OF
ADMINISTRATIONS/BOOK
KEEPER**

04/23/2016

Electronic Signature of Signing Officer/Director Detail

Date