

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006565

Entity Name: FIREWALL MINISTRIES, INC.**Current Principal Place of Business:**13044 SPRING LAKE DR
COOPER CITY, FL 33330**Current Mailing Address:**13044 SPRING LAKE DR
COOPER CITY, FL 33330**FEI Number: 06-1704451****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FERNANDEZ, ANDRES
13044 SPRING LAKE DR
COOPER CITY, FL 33330 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 PRESIDENT
Name FERNANDEZ, ANDRES
Address 13044 SPRING LAKE DR.
City-State-Zip: COOPER CITY FL 33330

Title TREASURER
Name MARKS, BILL
Address 2207 CHARLESTON
City-State-Zip: WESTON FL 33326

Title SECRETARY
Name GONZALEZ, BILL
Address 6411 SW 183RD WAY
City-State-Zip: SOUTHWEST RANCHES FL 33331

Title DIRECTOR
Name ZYMROZ, EDMUND
Address 5248 S.W. 117TH AVE.
City-State-Zip: COOPER CITY FL 33330

Title DIRECTOR
Name EGUES, JORGE
Address 2941 HIDDEN HOLLOW LANE
City-State-Zip: DAVIE FL 33328

Title DIRECTOR
Name LUIS, MARLON
Address 13251 SW 16TH CT.
City-State-Zip: DAVIE FL 33325

Title DIRECTOR
Name BAYONA, GISELLE
Address 20225 NE 34 CT.
 #714
City-State-Zip: AVENTURA FL 33180

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: ANDRES FERNANDEZ**EXECUTIVE DIRECTOR****01/16/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date