

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000008207

**Entity Name:** 2ND MILE MINISTRIES, INC.

**Current Principal Place of Business:**

4003 N. PEARL STREET  
JACKSONVILLE, FL 32206

**Current Mailing Address:**

1650 MARGARET ST  
SUITE 302, #339  
JACKSONVILLE, FL 32204 US

**FEI Number:** 73-1715604

**Certificate of Status Desired:** No

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

SCHRIEBER, GLEN  
1380 SUN MARSH DRIVE  
JACKSONVILLE, FL 32225 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:** GLEN SCHRIEBER

04/05/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            EX D  
Name            BLACKBURN, JONATHAN  
Address        6717 DRAYTON ST  
City-State-Zip: JACKSONVILLE FL 32208

Title            PRES  
Name            SCHRIEBER, GLEN  
Address        1380 SUN MARSH DRIVE  
City-State-Zip: JACKSONVILLE FL 32225

Title            OFFICER  
Name            ACKLEY, PHIL  
Address        1015 ATLANTIC BLVD  
                  #163  
City-State-Zip: JACKSONVILLE FL 32233

Title            OFFICER  
Name            MITCHELL, TIHESHA  
Address        1730 W. 23RD ST  
City-State-Zip: JACKSONVILLE FL 32209

Title            OFFICER  
Name            PONTIGO, SHANEL  
Address        217 ISLE WAY LANE  
City-State-Zip: JACKSONVILLE FL 32082

Title            OFFICER  
Name            DINGLER, MARK  
Address        1525 MARKET ST  
City-State-Zip: JACKSONVILLE FL 32206

Title            OFFICER  
Name            FAYE, THOMAS  
Address        4003 N. PEARL ST  
City-State-Zip: JACKSONVILLE FL 32206

*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:** JONATHAN BLACKBURN

**EXECUTIVE DIRECTOR**

04/05/2016

Electronic Signature of Signing Officer/Director Detail

Date