

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000004347

**FILED**  
**Feb 10, 2015**  
**Secretary of State**  
**CC8051542590**

**Entity Name:** ERROL MUSTAFA MINISTRIES, INC.

**Current Principal Place of Business:**

1748 TALL TREE DR., EAST  
JACKSONVILLE, FL 32246

**Current Mailing Address:**

1748 TALL TREE DR., EAST  
JACKSONVILLE, FL 32246

**FEI Number:** 65-1272517

**Certificate of Status Desired:** No

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

MUSTAFA, ERROL  
1748 TALL TREE DR., EAST  
JACKSONVILLE, FL 32246 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 D  
Name MUSTAFA, ERROL  
Address 1748 TALL TREE DR., EAST  
City-State-Zip: JACKSONVILLE FL 32246

Title D  
Name MUSTAFA, DEBBIE  
Address 1748 TALL TREE DR., EAST  
City-State-Zip: JACKSONVILLE FL 32246

Title D  
Name MERRITT, DIANE  
Address 1748 TALL TREE DR. E.  
City-State-Zip: JACKSONVILLE FL 32246

*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:** DIANE MERRITT

**BOOKKEEPER**

**02/10/2015**

Electronic Signature of Signing Officer/Director Detail

Date