

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000003584

**Entity Name:** 6:8 MINISTRIES INC.

**Current Principal Place of Business:**

205 JOHNS GLEN DRIVE  
JACKSONVILLE, FL 32259

**Current Mailing Address:**

PO BOX 2234  
PALM CITY, FL 34991 US

**FEI Number:** 20-8800123

**Certificate of Status Desired:** No

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

BOULTER, SPENCER  
205 JOHNS GLEN DRIVE  
JACKSONVILLE, FL 32259 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:** SPENCER BOULTER

03/15/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT, DIRECTOR  
Name            BOULTER, SPENCER K  
Address        205 JOHNS GLEN DRIVE  
City-State-Zip: JACKSONVILLE FL 32259

Title            CHAIRMAN  
Name            HARDING, MAJOR  
Address        1310 CREIGHTON BLUFF LANE  
City-State-Zip: JACKSONVILLE FL 32223

Title            VP  
Name            HOOPER, ROB  
Address        313 SUN MARSH COURT  
City-State-Zip: ST. JOHNS FL 32259

Title            TREASURER  
Name            MACFERRAN, DAN  
Address        34 226TH AVE S  
City-State-Zip: JACKSONVILLE BEACH FL 32250

Title            SECRETARY  
Name            DISSELKOEN, SUSAN  
Address        987 S. DIAMOND RD  
City-State-Zip: MASON MI 48854

Title            DIRECTOR  
Name            QUAGLIATA, DANIEL  
Address        8974 DEXTER PINCKNEY ROAD  
City-State-Zip: PINCKNEY MI 48169

Title            DIRECTOR  
Name            SULLIVAN, PATRICK  
Address        1138 FRUIT COVE RD  
City-State-Zip: ST. JOHNS FL 32259

Title            DIRECTOR  
Name            WHITE, JIM  
Address        1224 SPRING BRANCH RD  
City-State-Zip: ST. JOHNS FL 32259

*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:** SPENCER BOULTER

PRESIDENT

03/15/2022

Electronic Signature of Signing Officer/Director Detail

Date