

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000004512

**Entity Name:** DWAIN&CAROLYN FEEDING MINISTRY INC.**Current Principal Place of Business:**5740 S.W. 40TH CT  
HOLLYWOOD, FL 33023**Current Mailing Address:**5740 S.W. 40TH CT  
HOLLYWOOD, FL 33023 US**FEI Number: 71-1043792****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WARREN, CAROLYN  
5740 S.W.40TH CT  
HOLLYWOOD, FL 33023 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           | PTS                |
| Name            | WARREN, CAROLYN N  |
| Address         | 5740 S.W.40TH CT   |
| City-State-Zip: | HOLLYWOOD FL 33023 |

|                 |                    |
|-----------------|--------------------|
| Title           | VICE               |
| Name            | WARREN D, WAIN     |
| Address         | 5740 S.W.40TH CT   |
| City-State-Zip: | HOLLYWOOD FL 33023 |

|                 |                    |
|-----------------|--------------------|
| Title           | T                  |
| Name            | WARREN, CAROLYN    |
| Address         | 5740 S.W.40TH CT   |
| City-State-Zip: | HOLLYWOOD FL 33023 |

|                 |                    |
|-----------------|--------------------|
| Title           | T                  |
| Name            | DWAIN, WARREN      |
| Address         | 5740 S.W.40TH CT   |
| City-State-Zip: | HOLLYWOOD FL 33023 |

|                 |                    |
|-----------------|--------------------|
| Title           | T                  |
| Name            | TAYLOR, CARLETHA   |
| Address         | 4145 SW 19 ST      |
| City-State-Zip: | HOLLYWOOD FL 33023 |

*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: CAROLYN WARREN****OWNER****04/18/2023**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date