

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007122

Entity Name: HOWARD KOYL MINISTRIES, INC.**Current Principal Place of Business:**4837 ROCK SPRINGS RD
APOPKA, FL 32712**Current Mailing Address:**4837 ROCK SPRINGS RD
APOPKA, FL 32712 US**FEI Number:** 87-0806637**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KOYL, HOWARD E. SR.
4837 ROCK SPRINGS RD
APOPKA, FL 32712 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:** HOWARD E.. KOYL

04/13/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name KOYL, HOWARD E. SR.
Address 4837 ROCK SPRINGS RD
City-State-Zip: APOPKA FL 32712

Title D
Name KOYL, SHARON K
Address 4837 ROCK SPRINGS RD
City-State-Zip: APOPKA FL 32712

Title D
Name THRIFT, BELINDA
Address 164 PINECREST DR.
City-State-Zip: SANFORD FL 32773

Title DIRECTOR
Name MORALES, EDWIN
Address 317 RIVERCHASE DR.
City-State-Zip: ORLANDO FL 32807

Title DIRECTOR
Name GARY, BONNIE
Address 3319 GOLDEN GEM RD.
City-State-Zip: APOPKA FL 32712

Title DIRECTOR
Name SYLVAIN, JEAN
Address 715 QUINTILIAN AVE.
City-State-Zip: ORLANDO FL 32809

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: HOWARD E KOYL SR.**REGISTERED AGENT**

04/13/2017

Electronic Signature of Signing Officer/Director Detail

Date