

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000007307

Entity Name: 4GIVEN MINISTRIES, INC

Current Principal Place of Business:

4409 HOFFNER AVENUE
SUITE 120
ORLANDO, FL 32812

Current Mailing Address:

C/O PROFESSIONAL ACCOUNTING
1420 CELEBRATION BLVD, SUITE 200
CELEBRATION, FL 34747

FEI Number: 27-0633658

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PROFESSIONAL ACCOUNTING & TAX SERVICE INC
1420 CELEBRATION BLVD
SUITE 200
CELEBRATION, FL 34747 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 P
Name WATSON, JOHN
Address 3009 IVEL DRIVE
City-State-Zip: ORLANDO FL 32806

Title VP
Name HARRIS, RICHARD J
Address 6891 SPERONE STREET
City-State-Zip: ORLANDO FL 32819

Title S
Name ANGELES, LINDA M
Address 2348 TOPAZ TRAIL
City-State-Zip: KISSIMMEE FL 34743

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: JOHN WATSON

PRESIDENT

05/06/2015

Electronic Signature of Signing Officer/Director Detail

Date