# 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: MILDRED EASON

Electronic Signature of Signing Officer/Director Detail

## 2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# N09000010438

Entity Name: M. A. E. MINISTRIES, INC.

## Current Principal Place of Business:

2175 WINTERMERE POINTE DRIVE WINTER GARDEN, FL 34787

## **Current Mailing Address:**

2175 WINTERMERE POINTE DRIVE WINTER GARDEN, FL 34787

## FEI Number: 27-0686944

## Name and Address of Current Registered Agent:

EASON, MILDRED A 2175 WINTERMERE POINTE DRIVE WINTER GARDEN, FL 34787 US Certificate of Status Desired: No

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

#### Officer/Director Detail :

Title	PD	Title	VPD	
Name	EASON, MILDRED A	Name	ADAMS, STEPHANIE	
Address	2175 WINTERMERE POINTE DRIVE	Address	2175 WINTERMERE POINTE DRIVE	
City-State-Zip:	WINTER GARDEN FL 34787	City-State-Zip:	WINTER GARDEN FL 34787	
Title	D	Title	D	
THE	D	The	В	
Name	ADAMS, RUTHA M	Name	BURKS, SHARON	
Address	2175 WINTERMERE POINTE DRIVE	Address	2175 WINTERMERE POINTE DRIVE	
City-State-Zip:	WINTER GARDEN FL 34787	City-State-Zip:	WINTER GARDEN FL 34787	
Title	D			
Name	ADAMS, BARBARA J			
Address	2175 WINTERMERE POINTE DRIVE			
City-State-Zip:	WINTER GARDEN FL 34787			

PRESIDENT

09/16/2014

Date

Date