

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

DOCUMENT# N15000001620

**Entity Name:** 4:11 MINISTRIES, CORP.

**Current Principal Place of Business:**

208 W ORANGE ST  
WAUCHULA, FL 33873

**Current Mailing Address:**

845 ALTMAN ROAD  
WAUCHULA, FL 33873

**FEI Number:** 47-3068817

**Certificate of Status Desired:** No

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

WRIGHT, CARLOTTA  
845 ALTMAN ROAD  
WAUCHULA, FL 33873 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:** CARLOTTA WRIGHT

04/12/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR/SECRETARY  
Name HORN, KELI DEAN  
Address 145 WINONA CIRCLE  
City-State-Zip: AUBURNDALE FL 33823

Title DIRECTOR/PRESIDENT  
Name WRIGHT, CARLOTTA  
Address 845 ALTMAN RD  
City-State-Zip: WAUCHULA FL 33873

Title DIRECTOR  
Name WINE, DAVID  
Address 6632 LEMON TREE DR  
City-State-Zip: LAKELAND FL 33813

Title DIRECTOR  
Name BURPEE, JOHN G  
Address 15248 MALLARD CREEK ST  
City-State-Zip: ROANOKE TX 76262

Title OFFICER  
Name TAYLOR, WILLIAM BARRY  
Address 309 E BAY STREET  
City-State-Zip: WAUCHULA FL 33873

Title DIRECTOR/TREASURER  
Name LANIER, STEPHANIE RENE  
Address 1786 N IROQUOIS RD  
City-State-Zip: AVON PARK FL 33825

*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:** CARLOTTA WRIGHT

PRESIDENT/DIRECTOR

04/12/2022

Electronic Signature of Signing Officer/Director Detail

Date