

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N19000001937

**Entity Name:** LAFLEUR MINISTRIES INC

**Current Principal Place of Business:**

1070 MONTGOMERY RD 2082  
ALTAMAONTE SPRINGS, FL 32714

**Current Mailing Address:**

826 SW 8TH CT  
CAPE CORAL, FL 33991 US

**FEI Number:** 83-3738672

**Certificate of Status Desired:** Yes

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

LEAGLINC CORPORATE SERVICES INC  
5237 SUMMERLIN COMMONS STE 400  
FORT MYERS, FL 33907 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 D  
Name JUNETTE, OSTINVIL  
Address 826 SW 8TH CT  
City-State-Zip: CAPE CORAL FL 33991

Title D  
Name SHANA, OSTINVIL  
Address 826 SW 8TH CT  
City-State-Zip: CAPE CORAL FL 33991

Title D  
Name GENCHER, LAFLUER  
Address 1070 MONTGOMERY RD 2082  
City-State-Zip: ALTAMAONTE SPRINGS FL 32714

*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:** JUNETTE OSTINVIL

MANAGER

02/06/2021

Electronic Signature of Signing Officer/Director Detail

Date