

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N21000001565

**Entity Name:** LEAVE THE 99 MINISTRIES INC.

**Current Principal Place of Business:**

101 GREENLEAF AVE  
LAKE PLACID, FL 33852

**Current Mailing Address:**

101 GREENLEAF AVE  
LAKE PLACID, FL 33852

**FEI Number: 86-1864477**

**Certificate of Status Desired: No**

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

SENTOVICH, FAYE L  
101 GREENLEAF AVE  
LAKE PLACID, FL 33852 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 SENTOVICH, FAYE L  
Address 101 GREENLEAF AVE  
City-State-Zip: LAKE PLACID FL 33852

Title D  
Name JARVIS, LOUISE  
Address 7663 MARTINO CIR.  
City-State-Zip: NAPLES FL 34112

Title D  
Name BARRETT, JESSE  
Address 2525 52ND AVE NE  
City-State-Zip: NAPLES FL 34120

Title D  
Name RAHAIM, TONY  
Address PO BOX 898  
City-State-Zip: WAYNESVILLE NC 28786

Title D  
Name SENTOVICH, MITCHELL T  
Address 101 GREENLEAF AVE  
City-State-Zip: LAKE PLACID FL 33852

*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: FAYE SENTOVICH**

**PRESIDENT**

**03/12/2023**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date