

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21000013346

Entity Name: NAMELESS MINISTRIES INC**Current Principal Place of Business:**10925 TAILFEATHER CT
TAMPA, FL 33625**Current Mailing Address:**10925 TAILFEATHER CT
TAMPA, FL 33625 US**FEI Number:** 87-3743519**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NAMELESS MINISTRIES INC
10925 TAILFEATHER CT
TAMPA, FL 33625 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:** FRANCESCA L MICHELINI

08/09/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name MICHELINI, FRANCESCA L
Address 10925 TAILFEATHER CT
City-State-Zip: TAMPA FL 33625

Title VTD
Name MICHELINI, NICHOLAS
Address 10925 TAILFEATHER CT
City-State-Zip: TAMPA FL 33625

Title VSD
Name MICHELINI, VALENTINA
Address 10925 TAILFEATHER CT
City-State-Zip: TAMPA FL 33625

Title MD
Name JOHNSON, MILANI
Address 10925 TAILFEATHER CT
City-State-Zip: TAMPA FL 33625

Title D
Name JOHNSON, MICHAEL
Address 10925 TAILFEATHER CT
City-State-Zip: TAMPA FL 33625

Title D
Name BURNS, LYDIA M
Address 10925 TAILFEATHER CT
City-State-Zip: TAMPA FL 33625

Title BOARD MEMBER, DIRECTOR
Name KENT , DENNEY
Address 10925 TAILFEATHER CT
City-State-Zip: TAMPA FL 33625

Title DIRECTOR
Name MICHELINI, STEPHEN
Address 2407 W SUNSET DR
City-State-Zip: TAMPA FL 33629

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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: FRANCESCA LEE MICHELINI**OFFICER**

08/09/2025

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name KAREN, CONROY
Address 10925 TAILFEATHER CT
City-State-Zip: TAMPA FL 33625

Title DIRECTOR, SECRETARY
Name CATHY, AGACINSKI
Address 10925 TAILFEATHER CT
City-State-Zip: TAMPA FL 33625

Title DIRECTOR, TREASURER
Name BRIAN, ANTHONY
Address 10925 TAILFEATHER CT
City-State-Zip: TAMPA FL 33625