

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N23000000398

**Entity Name:** LINDA RAMOS MINISTRIES INC

**Current Principal Place of Business:**

6160 SW HWY 200  
STE110 #19  
OCALA, FL 34776

**Current Mailing Address:**

6160 SW HWY 200  
STE 110 #19  
OCALA, FL 34476 US

**FEI Number:** 92-2528943

**Certificate of Status Desired:** No

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

RAMOS, LINDA E  
6160 SW HWY 200  
STE 110 #19  
OCALA, FL 34476 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 RAMOS, LINDA E  
Address 6160 SW HWY 200  
STE 110 #19  
City-State-Zip: Ocala FL 34476

Title TRES  
Name DONNELL, KORNILOUS A  
Address 1198 LAKE LUCERNE CR  
City-State-Zip: WINTER SPRINGS FL 32708

Title SEC  
Name DONNELL, NATALIE  
Address 1198 LAKE LUCERNE CR  
City-State-Zip: WINTER SPRINGS FL 32708

*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:** LINDA RAMOS

P

04/11/2024

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

\_\_\_\_\_  
Date