

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44001

Entity Name: TRUE FOUNDATION MINISTRIES, INC.**Current Principal Place of Business:**608 RANDOLPH STREET
CRESCENT CITY, FL 32112**Current Mailing Address:**POST OFFICE BOX 781
CRESCENT CITY, FL 32112 US**FEI Number:** 59-3129205**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GEORGE, GWENDOLYN FPRESIDE
1499 ROBINWOOD DRIVE
DELAND, FL 32720 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	PD
Name	GEORGE, GWENDOLYN F
Address	1499 ROBINWOOD DRIVE
City-State-Zip:	DELAND FL 32720

Title	D
Name	SCOTT, TERI M
Address	117 LEAH DRIVE
City-State-Zip:	CLAYTON NC 27520

Title	TSD
Name	WHYTE, CARMEN M
Address	1445 HAMILTON AVENUE
City-State-Zip:	ORANGE CITY FL 32763

Title	D
Name	WILLIAMS, VANESSA R
Address	1002 BELLEVUE AVENUE
City-State-Zip:	SOUTH BEND IN 46615

Title	D
Name	JOHNSON, ROSA
Address	506 WEST MAIN STREET
City-State-Zip:	BENNETTSVILLE SC 29512

Title	D
Name	FORMAN, ARTHUR L
Address	2345 BROADWAY APT 737
City-State-Zip:	NEW YORK NY 10024

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: GWENDOLYN F. GEORGE**PRESIDENT****05/14/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date