

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000357

Entity Name: TAMPA BAY MESSAGE OF HEALTH MINISTRIES, INC.

Current Principal Place of Business:

3981 68TH AVENUE NORTH
PINELLAS PARK, FL 33781

Current Mailing Address:

3981 68TH AVENUE NORTH
PINELLAS PARK, FL 33781

FEI Number: 59-3221248

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FLETCHER, CLIVE A
326 51ST AVENUE N.
ST. PETERSBURG, FL 33703 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 FLETCHER, CLIVE AMR.
Address 326 -51ST AVE N.
City-State-Zip: ST PETERSBURG FL 33703

Title SD
Name FLETCHER, RHONI EMRS.
Address 326 -51ST AVE N.
City-State-Zip: ST PETERSBURG FL 33703

Title TD
Name SCOTT, KENNETH CMR.
Address 1401 45TH STREET SOUTH
City-State-Zip: ST. PETERSBURG FL 33711

Title VD
Name RICHARD, KELLYE MRS
Address 326 51ST AVENUE NORTH
City-State-Zip: ST. PETERSBURG FL 33703

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: MRS RHONI E FLETCHER

SD

04/29/2014

Electronic Signature of Signing Officer/Director Detail

Date