

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N96000005952

**Entity Name:** POWER-LINE MINISTRIES, INC.

**Current Principal Place of Business:**

278 NE 35TH CT  
OAKLAND PARK, FL 33334

**Current Mailing Address:**

P. O. BOX 835107  
HOLLYWOOD, FL 33083

**FEI Number:** 65-0718505

**Certificate of Status Desired:** No

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

MILLER, SAMUEL  
6636 ARBOR DRIVE  
MIRAMAR, FL 33023 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 DP  
Name MILLER, SAMUEL  
Address 278 NE 35TH CT  
City-State-Zip: OAKLAND PARK FL 33334

Title VP  
Name MILLER, ALICE  
Address 278 NE 35TH CT  
City-State-Zip: OAKLAND PARK FL 33334

Title TD  
Name WALLACE, JULIET  
Address 3031 WINDWARD WAY  
City-State-Zip: MIRAMAR FL 33025

Title DS  
Name BAKER, ANNMARIE  
Address 20822 N W 24TH CT  
City-State-Zip: MIAMI GARDENS FL 33056

Title D  
Name HENRY, CLEMENT  
Address 6741 PANSEY DR.  
City-State-Zip: MIRAMAR FL 33023

Title D  
Name SWEETLAND, COLIN  
Address 278 NE 35TH CT  
City-State-Zip: OAKLAND PARK FL 33334

*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:** SAMUEL MILLER

**PRESIDENT**

**04/18/2022**

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

\_\_\_\_\_  
Date