

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000497

Entity Name: A.J. WELLS MINISTRIES, INC.**Current Principal Place of Business:**2920 NW 12TH ST
FORT LAUDERDALE, FL 33311**Current Mailing Address:**4031 NE 2ND WAY
POMPANO BEACH, FL 33064**FEI Number:** 65-0942050**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HOCHSZTEIN, FRED
3475 SHERIDAN STREET
SUITE 209
HOLLYWOOD, FL 33021 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	WELLS, SR., ANDREW JSR
Address	4031 NE 2ND WAY
City-State-Zip:	POMPANO BEACH FL 33064

Title	1VP
Name	WELLS, ANDREW JJR.
Address	4031 NE 2ND WAY
City-State-Zip:	POMPANO BEACH FL 33064

Title	2VP
Name	WELLS, ANTONIO G
Address	4031 NE 2ND WAY
City-State-Zip:	POMPANO BEACH FL 33064

Title	T
Name	POITIER, PRISCILLA
Address	4031 NE 2ND WAY
City-State-Zip:	POMPANO BEACH FL 33064

Title	S
Name	WELLS, CRYSTAL S
Address	4031 NE 2ND WAY
City-State-Zip:	POMPANO BEACH FL 33064

Title	MEMB
Name	RACHEL, RUBY
Address	4031 NE 2ND WAY
City-State-Zip:	POMPANO BEACH FL 33064

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: PRISCILLA POITIER

T

06/17/2020

Electronic Signature of Signing Officer/Director Detail_____
Date