

2018 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N07000003099

Entity Name: EMBRACING GOD MINISTRIES, INC.

Current Principal Place of Business:

11124 KINGSTON PIKE, SUITE 119 #400
KNOXVILLE, TN 37934

Current Mailing Address:

11124 KINGSTON PIKE, SUITE 119 #400
KNOXVILLE, TN 37934

FEI Number: 65-1299839

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

INCORP SERVICES, INC.
17888 67TH COURT NORTH
LOXAHATCHEE, FL 33470 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 DIRECTOR, PRESIDENT
Name MONTALVAN, S
Address 11124 KINGSTON PIKE, SUITE 119 #400
City-State-Zip: KNOXVILLE TN 37934

Title DIRECTOR, COO
Name MONTALVAN, R
Address 11124 KINGSTON PIKE, SUITE 119 #400
City-State-Zip: KNOXVILLE TN 37934

Title DIRECTOR, CHAIRMAN
Name K, D
Address 11124 KINGSTON PIKE, SUITE 119 #400
City-State-Zip: KNOXVILLE TN 37934

Title DIRECTOR
Name F, D
Address 11124 KINGSTON PIKE, SUITE 119 #400
City-State-Zip: KNOXVILLE TN 37934

Title DIRECTOR
Name M, J
Address 11124 KINGSTON PIKE, SUITE 119 #400
City-State-Zip: KNOXVILLE TN 37934

Title DIRECTOR
Name R, S
Address 11124 KINGSTON PIKE, SUITE 119 #400
City-State-Zip: KNOXVILLE TN 37934

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: R MONTALVAN

PRESIDENT

11/27/2018

Electronic Signature of Signing Officer/Director Detail

Date