

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000006238

Entity Name: ACROSS BORDERS MINISTRIES, INC.

Current Principal Place of Business:

3120 HAMBLIN WAY
WELLINGTON, FL 33414

Current Mailing Address:

3120 HAMBLIN WAY
WELLINGTON, FL 33414

FEI Number: 27-0436989

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILLIAMS, BRAD TRUMAN
3120 HAMBLIN WAY
WELLINGTON, FL 33414 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 D
Name HERRING, EARL TRUMAN JR
Address 22556 MIDDLETOWN DRIVE
City-State-Zip: BOCA RATON FL 33428

Title D
Name WOLCOTT, MARSHALL A
Address P.O. BOX 3568
City-State-Zip: LA PINE OR 97739

Title D
Name COUTINHO CARVALHO MA, LUIS GABRIEL
Address RUA DAS MANGUEIRAS, N22, KM 17 ITAPUAN
City-State-Zip: SALVADOR,BAHIZ, BRAZIL 41620

Title D
Name WILLIAMS, BRAD TRUMAN
Address 3120 HAMBLIN WAY
City-State-Zip: WELLINGTON FL 33414

Title DIRECTOR
Name HARPOLE, JOSHUA B.
Address P.O. BOX 114
City-State-Zip: LAPINE OR 97739

Title DIRECTOR
Name NELMS, DAVID
Address 2101 VISTA PARKWAY SUITE 201
City-State-Zip: WEST PALM BEACH FL 33411

Title DIRECTOR
Name KAPPAS, GREG PHD
Address 2641 LIVINGSTON LANE
City-State-Zip: WEST PALM BEACH FL 33411

Title DIRECTOR
Name STALLINGS, GEORGE BARRY JR.
Address P.O. BOX 7236
City-State-Zip: JUPITER FL 33468

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: BRAD TRUMAN WILLIAMS

PRESIDENT

03/21/2017

Electronic Signature of Signing Officer/Director Detail

Date