

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 702609

**FILED**  
**Jan 31, 2019**  
**Secretary of State**  
**3888729402CC**

**Entity Name:** BIBLE CHURCH OF GOD, INCORPORATED, OF BOYNTON BEACH, FLORIDA

**Current Principal Place of Business:**

1390 N. SEACREST BLVD  
BOYNTON BEACH, FL 33435

**Current Mailing Address:**

1390 NORTH SEACREST BOULEVARD  
BOYNTON BEACH, FL 33435 US

**FEI Number: 59-2821991**

**Certificate of Status Desired: No**

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

MOORE, KEITH S  
713 TALIA CIR  
PALM SPRINGS, FL 33346 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 PASTOR, PRESIDENT

Name BANKS, SYLVESTER

Address 17108 VALANCIA BLVD

City-State-Zip: LOXAHATCHEE FL 33470

Title SECRETARY

Name BANKS, KENNETH

Address 411 NORTHEAST 27TH AVENUE

City-State-Zip: BOYNTON BEACH FL 33435

Title CHAIRMAN

Name BANKS, ALTON L JR.

Address 430 NORTHWEST 5TH AVENUE

City-State-Zip: BOYNTON BEACH FL 33435

Title DIRECTOR

Name JOHNSON, REMIUS

Address 608 NORTHWEST 3RD STREET

City-State-Zip: BOYNTON BEACH FL 33435

Title DIRECTOR

Name BANKS, DAVID A

Address 7405 SUNNYHILL TERRACE

City-State-Zip: LANTANA FL 33462

Title CFO

Name MORELAND, KIM

Address 2758 SUMMERSET RD

City-State-Zip: LAKE WORTH FL 33462

*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: BANKS SYLVESTER**

**PRESIDENT**

**01/31/2019**

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

\_\_\_\_\_  
Date