Current Prin 5454 MOBILE I PENSACOLA,				
Current Mai	iling Address:			
5454 MOBIL PENSACOL	E HWY. A, FL 32526			
FEI Number: 59-1222322			Certificate of Status Desired: No	
Name and A	Address of Current Registered Agent:			
MOFFETT, RO 3248 TALLSHII PENSACOLA,				
The above name	d entity submits this statement for the purpose of changing its re	gistered office or regis	stered agent, or both, in the State of I	Florida.
	d entity submits this statement for the purpose of changing its re E: ROBERT MOFFETT	gistered office or regis	stered agent, or both, in the State of I	Florida. 04/24/2019
		gistered office or regis	stered agent, or both, in the State of I	
SIGNATUR	E: ROBERT MOFFETT	gistered office or regis	stered agent, or both, in the State of I	04/24/2019
SIGNATUR	E: ROBERT MOFFETT Electronic Signature of Registered Agent	gistered office or regis	stered agent, or both, in the State of H	04/24/2019
SIGNATURI Officer/Dire	E: ROBERT MOFFETT Electronic Signature of Registered Agent ctor Detail :			04/24/2019
SIGNATURE Officer/Dire	E: ROBERT MOFFETT Electronic Signature of Registered Agent ctor Detail : DT	Title	PASTOR	04/24/2019
SIGNATURE Officer/Dire Title Name	E: ROBERT MOFFETT Electronic Signature of Registered Agent Ctor Detail : DT PHELPS, BILL 255 AQUAMARINE AVE	Title Name Address	PASTOR ROBERT , MOFFETT	04/24/2019
SIGNATURE Officer/Dire Title Name Address	E: ROBERT MOFFETT Electronic Signature of Registered Agent Ctor Detail : DT PHELPS, BILL 255 AQUAMARINE AVE	Title Name Address	PASTOR ROBERT , MOFFETT 5454 MOBILE HWY.	04/24/2019
SIGNATURE Officer/Dire Title Name Address City-State-Zip:	E: ROBERT MOFFETT Electronic Signature of Registered Agent Ctor Detail : DT PHELPS, BILL 255 AQUAMARINE AVE PENSACOLA FL 32505	Title Name Address	PASTOR ROBERT , MOFFETT 5454 MOBILE HWY.	04/24/2019
SIGNATURE Officer/Dire Title Name Address City-State-Zip: Title	E: ROBERT MOFFETT Electronic Signature of Registered Agent Ctor Detail : DT PHELPS, BILL 255 AQUAMARINE AVE PENSACOLA FL 32505 DT	Title Name Address	PASTOR ROBERT , MOFFETT 5454 MOBILE HWY.	04/24/2019
SIGNATURE Officer/Dire Title Name Address City-State-Zip: Title Name	E: ROBERT MOFFETT Electronic Signature of Registered Agent Ctor Detail : DT PHELPS, BILL 255 AQUAMARINE AVE PENSACOLA FL 32505 DT ZIEGLER, RON 1496 WATER OAK TRAIL	Title Name Address	PASTOR ROBERT , MOFFETT 5454 MOBILE HWY.	04/24/2019

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: ROBERT MOFFETT

Electronic Signature of Signing Officer/Director Detail

PASTOR

## 04/24/2019

Date

FILED Apr 24, 2019 Secretary of State 9617427189CC

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 711454**

## Entity Name: CORNERSTONE BAPTIST CHURCH OF PENSACOLA, INC.

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