2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742626

Entity Name: FIRST CHURCH OF GOD, INC. OF CAPE CORAL, FLORIDA

FILED
Jun 13, 2019
Secretary of State
8397634724CC

Current Principal Place of Business:

2213 COUNTRY CLUB BLVD CAPE CORAL. FL 33990

Current Mailing Address:

2213 COUNTRY CLUB BLVD CAPE CORAL, FL 33990

FEI Number: 05-0037246 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

KEPOUROS, DELIA S. TREASURER 1936 FOUR MILE COVE PKWY. CAPE CORAL, FL 33990 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: DELIA S. KEPOUROS 06/13/2019

Electronic Signature of Registered Agent

Officer/Director Detail:

Name

Title BOARD OF GOVENORS CHAIRMAN Title TREASURER

Name NEACE, DONALD W PASTOR/REV. Name KEPOUROS, DELIA S. TREASURER

Address 1769 FOUR MILE COVE PKWY #915 Address 1936 FOUR MILE COVE PKWY

City-State-Zip: CAPE CORAL FL 33990 City-State-Zip: CAPE CORAL FL 33990

Title VC Title ADMINISTRATIVE ASSISTANT/OFFICE

KEPOUROS, JAMES MANAGER

Address 1936 FOUR MILE COVE PKWY

Address 1769 FOUR MILE COVE PKWY. #915
City-State-Zip: CAPE CORAL FL 33990

City-State-Zip: CAPE CORAL FL 33990 City-State-Zip: CAPE CORAL FL 33990

Title SECRETARY Title OFFICER

 Name
 HARGETT, MICAEL N
 Name
 MCCARTHY, DESRIN

 Address
 3011 SW 12TH AVENUE
 Address
 903 SE 34TH STREET

 City-State-Zip:
 CAPE CORAL FL 33914
 City State Zip: CAPE CORAL FL 33904

rry-State-Zip: CAPE CORAL FL 33914 City-State-Zip: CAPE CORAL FL 33904

Title OFFICER Title OFFICER

Name KAMINSKY, STEVEN Name WELSH, NICHOLAS

Address 1311 SE 17TH STREET Address UCF-APPOLLO MAIL CENTER P.O.

City-State-Zip: CAPE CORAL FL 33990 BOX 164229

City-State-Zip: ORLANDO FL 32816

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: DELIA S. KEPOUROS TREASURER 06/13/2019

Date