

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744104

FILED
Jan 26, 2014
Secretary of State
CC4181332753

Entity Name: RESTORATION FAMILY WORSHIP CENTER, INC.

Current Principal Place of Business:

2401 NW 47 AVE
FORT LAUDERDALE, FL 33313

Current Mailing Address:

P.O.BOX 120952
FT. LAUDERDALE, FL 33312

FEI Number: 65-0263316

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CLAYTON, DEBORAH L
2401 NW 47TH AVE
LAUDERHILL, FL 33313 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 PD
Name CLAYTON, DEBORAH L
Address 2401 NW 47TH AVE
City-State-Zip: LAUDERHILL FL 33313

Title SD
Name NATALIE, MADRY
Address 4530 NW 36 ST, APT #409
City-State-Zip: LAUDERDALE LAKES FL 33319

Title TD
Name MALONE, JAMES
Address 249 NE 39 CT
City-State-Zip: POMPANO BEACH FL 33060

Title D
Name AUDREY, MURRAY
Address 3121 NW 68 STREET
City-State-Zip: FT LAUDERDALE FL 33309

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: DEBORAH CLAYTON

PASTOR

01/26/2014

Electronic Signature of Signing Officer/Director Detail

Date