

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754597

Entity Name: PACE ASSEMBLY MINISTRIES, INC.**Current Principal Place of Business:**%JOSEPH ROGERS
3948 HWY 90
PACE, FL 32571-8998**Current Mailing Address:**%JOSEPH ROGERS
3948 HWY 90
PACE, FL 32571-8998**FEI Number:** 59-1944606**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ROGERS, JOSEPH
3948 HWY 90
PACE, FL 32571-8998 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:** REV. JOSEPH A. ROGERS

04/11/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :Title ST
Name DAVIS, ANTHONY
Address 3035 WHITLEY LANE
City-State-Zip: PACE FL 32571Title D
Name CALLOWAY, STONY
Address 3555 JUBILEE DRIVE
City-State-Zip: PACE FL 32571Title D
Name LOYED, CHARLES
Address 4847 JENNIFER DRIVE
City-State-Zip: PACE FL 32571Title D
Name TOMPKINS, JEREMY
Address 5616 DOVE DRIVE
City-State-Zip: PACE FL 32571Title DIRECTOR
Name GREESON, PHILIP
Address 3948 HWY 90
City-State-Zip: PACE FL 32571-8998Title PRESIDENT
Name ROGERS, JOSEPH
Address %JOSEPH ROGERS
3948 HWY 90
City-State-Zip: PACE FL 32571-8998Title DIRECTOR
Name PHILLIPS, DAVID
Address %JOSEPH ROGERS
3948 HWY 90
City-State-Zip: PACE FL 32571-8998

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: JOSEPH ROGERS

PRESIDENT

04/11/2017

Electronic Signature of Signing Officer/Director Detail

Date