

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000007573

**Entity Name:** CRY ALOUD SPARE NOT NEW TESTAMENT HOLINESS CHURCH, INC.**Current Principal Place of Business:**70 HILLTOP ROAD  
CENTURY, FL 32535**Current Mailing Address:**P.O. BOX 512  
CENTURY, FL 32535**FEI Number: 59-3682269****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**CRY ALOUD SPARE NOT NEW TESTAMENT HOLINESS CHURCH  
30 HWY 4 WEST  
CENTURY, FL 32535 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: IDAINER BRADLEY****02/28/2024**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY, TREASURER

Name PAGE, EMMA

Address 123 WASHINGTON COURT

City-State-Zip: FLOMATON AL 36441

Title TRUSTEE

Name ODOM, HARVEY JR

Address POB 667

City-State-Zip: FLOMATON AL 36441

Title CORRESPONDING SECRETARY

Name SMITH, DELORA A

Address 71 WASHINGTON COURT

City-State-Zip: FLOMATON AL 36441

Title PASTOR

Name BRADLEY, IDAINER W

Address PO BOX 512

City-State-Zip: CENTURY FL 32535

Title TRUSTEE

Name PAGE, EMMA

Address 101 WASHINGTON COURT

City-State-Zip: FLOMATON AL

Title PRESIDENT

Name BRADLEY, IDAINER W ELDER

Address 30 WEST HIGHWAY 4

City-State-Zip: CENTURY FL 32535

Title VP

Name SMITH, DELORA

Address 70 HILLTOP ROAD

City-State-Zip: CENTURY FL 32535

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: IDAINER W. BRADLEY****PASTOR****02/28/2024**

Electronic Signature of Signing Officer/Director Detail

Date