

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001043

Entity Name: SPRING OF LIFE CHURCH OF GOD IN CHRIST, INC.**Current Principal Place of Business:**4116 N 30TH STREET
TAMPA, FL 33610**Current Mailing Address:**3203 E. WILDER AVENUE
TAMPA, FL 33610**FEI Number: 59-3699996****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**GAYLORD, WILLIAM E
3203 E. WILDER AVENUE
TAMPA, FL 33610 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 PRESIDENT, DIRECTOR, TRUSTEE
Name GAYLORD, WILLIAM E
Address 4116 N. 30TH ST.
City-State-Zip: TAMPA FL 33610

Title TRUSTEE, DEACON, DIRECTOR
Name PERDUE, WALTER
Address 4116 N 30TH STREET
City-State-Zip: TAMPA FL 33610

Title TREASURER, TRUSTEE, DIRECTOR
Name GAINEY, REGINA E
Address 4116 N 30TH STREET
City-State-Zip: TAMPA FL 33610

Title SECRETARY, DIRECTOR
Name CHAMBERS, MALVINA
Address 4116 N 30TH STREET
City-State-Zip: TAMPA FL 33610

Title TRUSTEE, DIRECTOR
Name CECELIA MITCHEL
Address 4116 N 30TH STREET
City-State-Zip: TAMPA FL 33610

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: WILLIAM E. GAYLORD**PRESIDENT/PASTOR****01/11/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date