I hereby certify that the information indicated on this report or supplemental report is true and accc oath; that I am an officer or director of the corporation or the receiver or trustee empowered to exe above, or on an attachment with all other like empowered.		
SIGNATURE [,] LISA BENSON	TREASURER	01/29/2019

Electronic Signature of Signing Officer/Director Detail

Current Mailing Address: 1550 SW HEATHERWOOD BLVD PORT ST LUCIE. FL 34986 US

FEI Number: 02-0544468

DOCUMENT# N0200000327

1550 SW HEATHERWOOD BLVD PORT ST LUCIE. FL 34986

Current Principal Place of Business:

Name and Address of Current Registered Agent:

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: ALL VILLAGES PRESBYTERIAN CHURCH, INC.

BENSON, LISA J 433 SW FAIRWAY LAKE PORT ST LUCIE, FL 34986 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:

Date Electronic Signature of Registered Agent **Officer/Director Detail :** Title т Title S BENSON, LISA Name SHEARER, BETTY Name Address 920 SE ATLANTIC AVE Address 433 SW FAIRWAY LAKE City-State-Zip: PORT ST LUCIE FL 34983 City-State-Zip: PORT ST LUCIE FL 34986 Title V Title Ρ Name STERRETT, DUSTIN SILL, STEVE Name Address 478 NW DOVER CT Address 397 SW TODD AVE City-State-Zip: PORT ST LUCIE FL 34983 City-State-Zip: PORT ST LUCIE FL 34983

Certificate of Status Desired: Yes

FILED Jan 29, 2019 Secretary of State 3723580839CC

Date

TREASURER