

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001578

Entity Name: THE NEW CHURCH WITHOUT WALLS OF INVERNESS
FLORIDA, INC.**Current Principal Place of Business:**300 S. KENSINGTON AVE.
LECANTO, FL 34461**Current Mailing Address:**P.O. BOX 367
HERNANDO, FL 34441 US**FEI Number: 30-0098311****Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**ALEXANDER, DOUGLAS SR.
300 S. KENSINGTON AVE.
LECANTO, FL 34461-8860 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	VP
Name	ALEXANDER, DOUGLAS SR
Address	P. O. BOX 367
City-State-Zip:	HERNANDO FL 34441

Title	T
Name	VELEZ, CARMEN
Address	P.O. BOX 367
City-State-Zip:	HERNANDO FL 34441

Title	T
Name	SIMMONS, LYNDA
Address	P. O. BOX 367
City-State-Zip:	HERNANDO FL 34441

Title	P
Name	ALEXANDER, TERESA
Address	P. O. BOX 367
City-State-Zip:	HERNANDO FL 34441

Title	T
Name	WRIGHT, SONNY
Address	P. O. BOX 367
City-State-Zip:	HERNANDO FL 34441

Title	TRUSTEE
Name	JOHNSON, JOAN
Address	P.O. BOX 367
City-State-Zip:	HERNANDO FL 34441

Title	TRUSTEE
Name	SMITH, DANITA
Address	P.O. BOX 367
City-State-Zip:	HERNANDO FL 34441

Title	TRUSTEE
Name	CACDAC, FE
Address	P.O. BOX 367
City-State-Zip:	HERNANDO FL 34441

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: DOUGLAS ALEXANDER SR.

VP

03/08/2018

Electronic Signature of Signing Officer/Director Detail

Date