

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003611

Entity Name: GREATER GOD'S HOUSE OF WORSHIP, INC.**Current Principal Place of Business:**2901 PALM BAY RD., NE
UNIT D
PALM BAY, FL 32905**Current Mailing Address:**C/O 1399 HELIAS ST., N.W.
PALM BAY, FL 32907**FEI Number: 58-2668676****Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**TYSON, SHIRLEY A
1399 HELIAS ST., N.W.
PALM BAY, FL 32907 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 PCDO
Name TYSON, SHIRLEY A
Address 1399 HELIAS ST NW
City-State-Zip: PALM BAY FL 32907Title SECRETARY
Name BARBARA, HARDISON
Address 2326 BSHEANDOCH ROAD, NE
City-State-Zip: PALM BAY FL 32905Title DEACON
Name ELGIN, JORDAN
Address 904 JUANITA CIRCLE
City-State-Zip: MELBOURNE FL 32901Title OFFICER
Name ROGERS, TREACY
Address 399 TRIDENT AV SE
City-State-Zip: PALM BAY FL 32909Title OFFICER
Name EDMOND, WILLIEMAE
Address 525 TUCKER ST
City-State-Zip: MELBOURNE FL 32901Title OFFICER
Name TENNISON, STEVEN
Address 960 TAMARIND CIR
City-State-Zip: ROCKLEDGE FL 32955

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: PASTOR SHIRLEY A. TYSON**DIRECTOR****03/14/2025**_____
Electronic Signature of Signing Officer/Director Detail_____
Date