

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002641

Entity Name: THOMAS TEMPLE, CHURCH OF GOD IN CHRIST, INC.**Current Principal Place of Business:**516 NORTHWEST 16TH AVENUE
POMPANO BEACH, FL 33069**Current Mailing Address:**POST OFFICE BOX 668157
POMPANO BEACH, FL 33066 US**FEI Number:** 20-0892605**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ROBINSON, JAMAL L
516 NORTHWEST 16TH AVENUE
POMPANO BEACH, FL 33069 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:** JAMAL L ROBINSON

04/23/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TRUSTEE, PRESIDENT
Name WILLIAMS, JIMMIE L DR.
Address 1551 SW 189TH TERRANCE
City-State-Zip: PEMBROKE PINES FL 33029

Title SECRETARY, TRUSTEE
Name SHEPPARD, DOROTHY
Address 601 N.W. 23RD TERR.
City-State-Zip: POMPANO BEACH FL 33069

Title TRUSTEE
Name ROBINSON, JAMAL L
Address 1890 NW 6TH AVENUE
City-State-Zip: POMPANO BEACH FL 33060

Title TRUSTEE
Name GOODLEY, CAROLYN
Address 1901 NW 5TH TERRANCE
City-State-Zip: POMPANO BEACH FL 33060

Title TRUSTEE
Name BYNES, ADRIENNE
Address 516 NW 16TH AVENUE
City-State-Zip: POMPANO BEACH FL 33069

Title TRUSTEE
Name OGISTE, WILLA
Address 516 NORTHWEST 16TH AVENUE
City-State-Zip: POMPANO BEACH FL 33069

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: JAMAL L ROBINSON

TRUSTEE

04/23/2019

Electronic Signature of Signing Officer/Director Detail

Date