2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002641

Entity Name: THOMAS TEMPLE, CHURCH OF GOD IN CHRIST, INC.

FILED Feb 16, 2017 Secretary of State CC6223109927

Date

Current Principal Place of Business:

516 NORTHWEST 16TH AVENUE POMPANO BEACH, FL 33069

Current Mailing Address:

516 NORTHWEST 16TH AVENUE POMPANO BEACH, FL 33069

FEI Number: 65-0065691 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILLIAMS, JIMMIE L 1551 SW 189TH TERRRACE PEMBROKE PINES, FL 33029 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: BISHOP JIMMIE L. WILLIAMS 02/16/2017

Electronic Signature of Registered Agent

Officer/Director Detail:

TitleTRUSTEE, PRESIDENTTitleSECRETARY, TRUSTEENameWILLIAMS, JIMMIE L DR.NameSHEPPARD, DOROTHYAddress1551 SW 189TH TERRANCEAddress601 N.W. 23RD TERR.

City-State-Zip: PEMBROKE PINES FL 33029 City-State-Zip: POMPANO BEACH FL 33069

Title TRUSTEE Title TRUSTEE

NameROBINSON, JAMAL LNameROBINSON, VINCENTAddress1890 NW 6TH AVENUEAddress1030 NW 13 STREET

City-State-Zip: POMPANO BEACH FL 33060 City-State-Zip: FT. LAUDERDALE FL 33311

Title TRUSTEE Title TRUSTEE

Name GOODLEY, CAROLYN Name MEDLEY, BLANE

Address 1901 NW 5TH TERRANCE Address 3240 NW 84TH AVENUE

City-State-Zip: POMPANO BEACH FL 33060 City-State-Zip: SUNRISE FL 33351

Title TRUSTEE Title TRUSTEE

NameTERRY, MARKNameBYNES, ADRIENNEAddress324 NW 18TH AVENUEAddress516 NW 16TH AVENUE

City-State-Zip: POMPANO BEACH FL 33069 City-State-Zip: POMPANO BEACH FL 33069

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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 ROBINSON TRUSTEE 02/16/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title TRUSTEE

Name OGISTE, WILLA

Address 516 NORTHWEST 16TH AVENUE
City-State-Zip: POMPANO BEACH FL 33069