

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000007031

**FILED**  
**Feb 21, 2015**  
**Secretary of State**  
**CC6925694731**

**Entity Name:** CITY OF REFUGE BIBLE CENTER, INC.

**Current Principal Place of Business:**

614 MUSCOGEE RD  
CANTONMENT, FL 32533

**Current Mailing Address:**

PO BOX 7532  
PENSACOLA, FL 32526

**FEI Number:** 27-0019455

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

BOLDEN, JEFFERY III  
614 MUSCOGEE ROAD  
CANTONMENT, FL 32533 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 P  
Name BOLDEN, JEFFERY III  
Address 614 MUSCOGEE RD  
City-State-Zip: CANTONMENT FL 32533

Title V  
Name BOLDEN, WANDA F  
Address 614 MUSCOGEE RD  
City-State-Zip: CANTONMENT FL 32533

Title S  
Name BOLDEN, WANDA F  
Address 614 MUSCOGEE RD  
City-State-Zip: CANTONMENT FL 32533

Title T  
Name JOHNSON, FRANCES  
Address 614 MUSCOGEE RD  
City-State-Zip: CANTONMENT FL 32533

*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:** JEFFERY BOLDEN III

P

02/21/2015

Electronic Signature of Signing Officer/Director Detail

Date