

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007941

FILED
Apr 13, 2022
Secretary of State
3691083922CC

Entity Name: SURFSIDE COMMUNITY CHURCH, INC.

Current Principal Place of Business:

2818 SOUTH US HWY 1
SUITE E3
FORT PIERCE, FL 34982

Current Mailing Address:

P.O. BOX 2717
FT PIERCE, FL 34954-2717 US

FEI Number: 20-1543570

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

YOUNG, MARK
2830 RAINBOW DRIVE
FORT PIERCE, FL 34981 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 PD, PASTOR
Name YOUNG, MARK
Address 2830 RAINBOW DRIVE
City-State-Zip: FORT PIERCE FL 34981

Title ELDER, DIRECTOR
Name HUGHES, SHARON
Address 1818 SW LOFGREN AVENUE
City-State-Zip: PORT SAINT LUCIE FL 34953

Title DIRECTOR, ELDER
Name SHEFFER, CURTIS
Address 1212 SOUTH 11TH STREET
City-State-Zip: FORT PIERCE FL 34950

Title DIRECTOR, ELDER
Name MURDOCK, MELISSA
Address 249 BIMINI DRIVE
City-State-Zip: FORT PIERCE FL 34949

Title ELDER, DIRECTOR
Name MEUTER, TIM
Address P.O. BOX 2717
City-State-Zip: FT PIERCE FL 34954-2717

Title ELDER, DIRECTOR
Name SHEFFER, CHERI
Address 1212 SOUTH 11TH STREET
City-State-Zip: FORT PIERCE FL 34950

Title DIRECTOR, ELDER
Name THOMASELLI, MEGAN
Address 2182 SW BURLINGTON STREET
City-State-Zip: PORT SAINT LUCIE FL 34984

Title ELDER, DIRECTOR
Name MERRITT, KRYSTAL
Address P.O. BOX 2717
City-State-Zip: FT PIERCE FL 34954-2717

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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: MARK A. YOUNG

PASTOR

04/13/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title ELDER, DIRECTOR
Name SHACKELFORD, JILLIAN
Address P.O. BOX 2717
City-State-Zip: FT PIERCE FL 34954-2717