#### 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. 03/02/2023

SIGNATURE: SHARMAN LEE-PHILPOT

Electronic Signature of Signing Officer/Director Detail

Ρ Title V PHILPOT, LARRY L LEE-PHILPOT, SHARMAN L Name Name

2023 FLORIDA	NOT FOR PROFIT	<b>CORPORATION</b>	ANNUAL REPORT

DOCUMENT# N0400008140

Entity Name: JEHOVAH RAPHA WORSHIP CENTER INC.

#### **Current Principal Place of Business:**

7452 RIMROCK CT JACKSONVILLE, FL 32222

### **Current Mailing Address:**

PO BOX 441122 JACKSONVILLE, FL 32244 US

## FEI Number: 74-3144316

# Name and Address of Current Registered Agent:

PHILPOT, LARRY L 7452 RIMROCK CT JACKSONVILLE, FL 32222 US

SIGNATURE: Electronic Signature of Registered Agent **Officer/Director Detail :** Title

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.

7452 RIMROCK CT	Address	7452 RIMROCK CT
JACKSONVILLE FL 32222	City-State-Zip:	JACKSONVILLE FL 32222
ST		
BROWN, MARIA		
4051 SPRING GLEN RD		
JACKSONVILLE FL 32207		
	JACKSONVILLE FL 32222 ST BROWN, MARIA 4051 SPRING GLEN RD	JACKSONVILLE FL 32222 City-State-Zip: ST BROWN, MARIA 4051 SPRING GLEN RD

Certificate of Status Desired: No

FILED Mar 02, 2023 Secretary of State 9649851467CC

Date

Date

VP