#### 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.

V

SIGNATURE: SHARMAN LEE-PHILPOT

Electronic Signature of Signing Officer/Director Detail

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.

Officer/Director Detail :			
Title	Р	Title	V
Name	PHILPOT, LARRY L	Name	LEE-PHILPOT, SHARMAN
Address	7452 RIMROCK CT	Address	7452 RIMROCK CT
City-State-Zip:	JACKSONVILLE FL 32222	City-State-Zip:	JACKSONVILLE FL 322
Title	<b>CT</b>		
The	ST		
Name	BROWN, MARIA		

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

SIGNATURE:

Address

City-State-Zip:

2021 FLORIDA NOT FOR PROFIT CORPORATION 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:

4051 SPRING GLEN RD

JACKSONVILLE FL 32207

Electronic Signature of Registered Agent

FILED Mar 25, 2021 Secretary of State 9935520328CC

Certificate of Status Desired: No

AN L 222

> 03/25/2021 Date

Date