2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0400008252

Entity Name: SHATTERING DARKNESS INC.

Current Principal Place of Business:

180 BROOKESTONE POINT FAYETTEVILLE, GA 30215

Current Mailing Address:

180 BROOKESTONE POINT FAYETTEVILLE, GA 30215

FEI Number: 20-1785476

Name and Address of Current Registered Agent:

FREY, JULIA L 215 NORTH EOLA DRIVE ORLANDO, FL 32801 US FILED Feb 21, 2022

Secretary of State

6345113120CC

Date

Certificate of Status Desired: No

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

Officer/Director Detail :

Title	DIRECTOR	Title	DIRECTOR
Name	DECKER, CHERYL	Name	WALLACE, LINDA
Address	5925 OLIVERA CANYON	Address	180 BROOKESTONE PT
City-State-Zip:	SANTA MARIA CA 93454	City-State-Zip:	FAYETTEVILLE GA 30215
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Title	SECRETARY	Title	PRESIDENT
Name	KORT, NANCY	Name	MITCHELL, BILL
Address	12321 WATER OAK DRIVE	Address	3951 CORVETA CT.
City-State-Zip:	FT. WORTH TX 76244	City-State-Zip:	ORLANDO FL 32837
Title	DIRECTOR	Title	MISSIONARY, EXECUTIVE DIRECTOR
Name	DAVIDSON, RUSS	Name	KENNEDY, DOROTHY LYNN
Address	5606 E CONSERVATORY PL.	Address	14 SETTER PLACE
City-State-Zip:	STRAFFORD MO 65757	City-State-Zip:	BETHEL PARK PA 15102
Title	DIRECTOR OF BURKINA FASO MINISTRY AND MISSIONS		
Name	HIEN, PATRICE		
Address	BP 41		

City-State-Zip: DIEBOUGOU BURKINA FASO

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: LINDA D WALLACE

DIRECTOR

02/21/2022

Electronic Signature of Signing Officer/Director Detail

Date