

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

DOCUMENT# N04000008808

**Entity Name:** SOURCE OF GRACE CHURCH, INC.

**Current Principal Place of Business:**

15225 NE 8TH AVE  
MIAMI, FL 33162

**FILED**  
**Mar 28, 2015**  
**Secretary of State**  
**CC8182581075**

**Current Mailing Address:**

15225 NE 8TH AVE  
MIAMI, FL 33162 US

**FEI Number: 20-0122749**

**Certificate of Status Desired: No**

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

FERTIL, RICOT REV.  
15225 NE 8TH AVE  
MIAMI, FL 33161 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  
Name FERTIL, RICOT REV  
Address 15225 NE 8TH AVE  
City-State-Zip: MIAMI FL 33162

Title TD  
Name YOUSLINE, ALCE PETIT DE  
Address 813 NW 119 ST.  
City-State-Zip: MIAMI FL 33161

Title SD  
Name JOCELYNE, DORVIL  
Address 655 NE 149 STREET  
City-State-Zip: MIAMI FL 33161

Title VD  
Name FLEURISSAINT, BENICE  
Address 1030 NW 132 ST  
City-State-Zip: MIAMI FL 33168

Title D  
Name FERTIL, LORSINSKA SR.  
Address 15225 NE 8TH AVE  
City-State-Zip: MIAMI FL 33162

Title DIRECTOR  
Name FLEURISSAINT, SOLANGE  
Address 1030 NW 132 ST  
City-State-Zip: MIAMI FL 33162

*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: RICOT FERTIL**

**PRESIDENT**

**03/28/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date