

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000001806

**FILED**  
**Apr 28, 2018**  
**Secretary of State**  
**CC8126857298**

**Entity Name:** FAITH LIFE INTERNATIONAL CHURCH INC

**Current Principal Place of Business:**

2407 E GRAVES AVE  
ORANGE CITY, FL 32763

**Current Mailing Address:**

2407 E GRAVES AVE  
ORANGE CITY, FL 32763

**FEI Number: 06-1741092**

**Certificate of Status Desired: No**

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

HOLMES, RONALD  
2407 E GRAVES AVE  
ORANGE CITY, FL 32763 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 HOLMES, RONALD  
Address 2407 E GRAVES AVE  
City-State-Zip: ORANGE CITY FL 32763

Title VPD  
Name HOLMES, GINA  
Address 2407 E GRAVES AVE  
City-State-Zip: ORANGE CITY FL 32763

Title TD  
Name TAYLOR, JENNIFER  
Address 2407 E GRAVES AVE  
City-State-Zip: ORANGE CITY FL 32763

Title SD  
Name ROBINSON, SABINE  
Address 2407 E GRAVES AVE  
City-State-Zip: ORANGE CITY FL 32763

Title DIRECTOR  
Name MESSAL, HELEN  
Address 2407 E GRAVES AVE  
City-State-Zip: ORANGE CITY FL 32763

*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: JENNIFER TAYLOR**

**TD**

**04/28/2018**

Electronic Signature of Signing Officer/Director Detail

Date