

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001592

Entity Name: MISSION BAPTIST CHURCH OF LAKE WALES, INC.**Current Principal Place of Business:**125 W STUART AVE
LAKE WALES, FL 33853**Current Mailing Address:**PO BOX 425
LAKE WALES, FL 33853**FEI Number:** 51-0538305**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MARDY, DENIS
1008 VALENTINA DR
DUNDEE, FL 33838 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	PV
Name	MARDY, DENIS
Address	1008 VALENTINA DR
City-State-Zip:	DUNDEE FL 33883

Title	T
Name	BERALD, JULIENNE
Address	1008 VALENTINA DR
City-State-Zip:	DUNDEE FL 33838

Title	ADV
Name	MARIE, MARDY J
Address	1008 VALENTINA DR
City-State-Zip:	DUNDEE FL 33838

Title	S
Name	PHILLIP, REZITA H
Address	401 WINSTON AVA G4
City-State-Zip:	LAKE WALES FL 33859

Title	A.S
Name	MARDY, MARIE J
Address	1008 VALENTINA DR
City-State-Zip:	DUNDEE FL 33838

Title	DEACON
Name	ALCIME, LUMAGE
Address	113 W STUART AVE
City-State-Zip:	LAKE WALES FL 33853

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: DENIS MARDY**PASTOR****06/10/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date