

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000011265

**Entity Name:** ALIVE CHURCH, INC.**Current Principal Place of Business:**5805 NW 37TH ST  
GAINESVILLE, FL 32653**Current Mailing Address:**5805 NW 37TH ST  
GAINESVILLE, FL 32653 US**FEI Number:** 20-5952768**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CLAYTOR, TABATHA  
1404 SW 109TH DR  
GAINESVILLE, FL 32607 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	CLAYTOR, KENNETH J
Address	1404 SW 109TH DRIVE
City-State-Zip:	GAINESVILLE FL 32607

Title	VPD
Name	CLAYTOR, TABATHA A
Address	1404 SW 109TH DRIVE
City-State-Zip:	GAINESVILLE FL 32607

Title	D
Name	VADEN, ALFRED B JR.
Address	5805 NW 37TH ST
City-State-Zip:	GAINESVILLE FL 32653

Title	D
Name	TALLEY, CRYSTAL P
Address	193 NW WHITE OAK GLEN
City-State-Zip:	LAKE CITY FL 32055

Title	DIRECTOR
Name	GUISTWITE, NEIL
Address	5805 NW 37TH ST
City-State-Zip:	GAINESVILLE FL 32653

*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:** TABATHA CLAYTOR**CFO****04/15/2016**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date