

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000010462

**Entity Name:** CHRISTIAN COALITION FAMILY CHURCH, INC.

**Current Principal Place of Business:**

7501 SW 75TH STREET  
GAINESVILLE, FL 32608

**Current Mailing Address:**

7501 SW 75TH STREET  
GAINESVILLE, FL 32608 US

**FEI Number:** 26-1115109

**Certificate of Status Desired:** Yes

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

CRAWFORD, LORENZO L  
7501 SW 75TH STREET  
GAINESVILLE, FL 32608 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:** LORENZO CRAWFORD

04/30/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title APOSTLE / FOUNDER/ OVERSEER  
Name CRAWFORD, LORENZO L.  
Address 7501 SW 75TH STREET  
City-State-Zip: GAINESVILLE FL 32608

Title OVERSEER / CORRESPONDING SECRETARY  
Name JOHNSON, ERENNEQUEA E.  
Address 7501 SW 75TH STREET  
City-State-Zip: GAINESVILLE FL 32608

Title PROPHETESS / SECRETARY  
Name REESE, ARIFAH  
Address 2309 SE 9TH AVENUE  
City-State-Zip: GAINESVILLE FL 32608

Title EVANGELIST  
Name CRAWFORD, EDWIN L  
Address 7501 SW 75TH STREET  
City-State-Zip: GAINESVILLE FL 32608

Title MINISTER  
Name PARKER, FREDERICK D. III  
Address 7585 SW75TH STREET  
City-State-Zip: GAINESVILLE FL 32608

Title MINISTER  
Name SMITH, ARIENNE M.  
Address 7501 SW 75TH STREET  
City-State-Zip: GAINESVILLE FL 32608

Title CHIEF PORTER  
Name HAMBRICK, RENETTA L.  
Address 7501 SW 75TH STREET  
City-State-Zip: GAINESVILLE FL 32608

Title PORTER  
Name DAVIS, CORNESIA D.  
Address 1117 SW 79TH TERRACE  
City-State-Zip: GAINESVILLE FL 32607

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*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:** ARIFAH REESE

**SECRETARY**

04/30/2024

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title            NETHINIM  
Name            DAVIS, WALTDRECOUS J.  
Address        1117 SW 79TH TERRACE  
City-State-Zip: GAINESVILLE FL 32607