

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07862

Entity Name: WAY OF LIFE ASSEMBLY OF GOD, INC.

Current Principal Place of Business:

8900 NW 44TH ST.
SUNRISE, FL 33351

Current Mailing Address:

8900 NW 44TH ST.
SUNRISE, FL 33351 US

FEI Number: 59-2710705

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MORROW, ROB
8900 NW 44TH ST.
SUNRISE, FL 33351 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: ROB MORROW

01/16/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

| | | | |
|-----------------|-------------------------|-----------------|--------------------|
| Title | DEACON, SECRETARY | Title | DEACON & TREASURER |
| Name | HERNANDEZ, RUBEN | Name | TRUJILLO, CHRIS |
| Address | 18864 SW 29TH COURT | Address | 9390 NW 33RD MANOR |
| City-State-Zip: | MIRAMAR FL 33029 | City-State-Zip: | SUNRISE FL 33351 |
| Title | DEACON | Title | DEACON |
| Name | MULET, JOSE (RICKY) | Name | KERR, ORVILLE |
| Address | 9580 SW 8TH ST. | Address | 9370 NW 36TH PLACE |
| City-State-Zip: | PEMBROKE PINES FL 33025 | City-State-Zip: | SUNRISE FL 33351 |
| Title | CHAIRMAN | | |
| Name | MORROW, ROB | | |
| Address | 5924 NW 117TH DRIVE | | |
| City-State-Zip: | CORAL SPRINGS FL 33076 | | |

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: ROB MORROW

CHAIRMAN

01/16/2019

Electronic Signature of Signing Officer/Director Detail

Date