## 2024 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N08000002814

Entity Name: CHURCH OF THE LIVING GOD OF THE PENTECOST INC.

FILED
Jun 24, 2024
Secretary of State
4124097384CR

**Current Principal Place of Business:** 

4471 COTSWOLD HILLS DR. LAKE WORTH. FL 33461

## **Current Mailing Address:**

4471 COTSWOLD HILLS DR. LAKE WORTH, FL 33461 US

FEI Number: 26-2191381 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

JOCELYN, ALFRED 3739 SPRING CREST COURT LAKE WORTH, FL 33467 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: JOCELYN ALFRED 06/24/2024

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title P Title F

NameALFRED, JOCELYNNameALFRED, NATHANAELLEAddress3739 SPRING CREST COURTAddress3739 SPRING CREST COURT

City-State-Zip: LAKE WORTH FL 33467 City-State-Zip: LAKE WORTH FL 33467

Title VP Title S

Name ANNULYSSE, JEAN Name ANNULYSSE, STALONNE

Address 1541 ALINE CT. Address 1541 ALINE CT.

City-State-Zip: DELRAY BEACH FL 33445 City-State-Zip: DELRAY BEACH FL 33445

Title S Title T

Name MARILUS, NEPTUNE Name ALFRED, JOCELYN

Address 6081 WAYCONDA E. Address 3739 SPRING CREST COURT

City-State-Zip: LAKE WORTH FL 33463 City-State-Zip: LAKE WORTH FL 33467

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: JOCELYN ALFRED HEAD PASTOR 06/24/2024