

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

DOCUMENT# N08000004635

**Entity Name:** MOMS4GOD, INC.

**Current Principal Place of Business:**

3501 BESSIE COLEMAN BLVD  
#23513  
TAMPA, FL 33623

**Current Mailing Address:**

3501 BESSIE COLEMAN BLVD  
#23513  
TAMPA, FL 33623 US

**FEI Number:** 26-2460003

**Certificate of Status Desired:** No

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

DORSEY, Janci  
3501 BESSIE COLEMAN BLVD.  
#23513  
TAMPA, FL 33625 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 DORSEY, Janci  
Address 3501 BESSIE COLEMAN BLVD.  
#23513  
City-State-Zip: TAMPA FL 33623

Title VPD  
Name GRANT, YVONNE  
Address BESSIE COLEMAN BLVD.  
#23513  
City-State-Zip: TAMPA FL 33623

Title BM  
Name SAWYER, SHIRLEY  
Address 1139 GRAND AVE  
City-State-Zip: SEBRING FL 33870

Title BM  
Name SHACHAR, YIRMYAH  
Address 1015 ASTOR COURT  
City-State-Zip: APOPKA FL 32712

Title SECRETARY  
Name JACKSON, TAMMY  
Address 9801 NORTH CONNECHUSETT ROAD  
City-State-Zip: TAMPA FL 33617

*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:** Janci Dorsey

**PRESIDENT**

**05/27/2016**

Electronic Signature of Signing Officer/Director Detail

Date