

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000006849

**Entity Name:** ANTIOCH FELLOWSHIP, INC.

**Current Principal Place of Business:**

3679 BERRYHILL RD  
PACE, FL 32571

**Current Mailing Address:**

3679 BERRYHILL RD  
PACE, FL 32571 US

**FEI Number:** 26-2420376

**Certificate of Status Desired:** Yes

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

JAMES, EARON M  
3679 BERRYHILL RD  
PACE, FL 32571 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 P  
Name JAMES, EARON M  
Address 3679 BERRYHILL RD  
City-State-Zip: PACE FL 32571

Title TS  
Name MANDEL, SHERRY  
Address 3679 BERRYHILL RD  
City-State-Zip: PACE FL 32571

Title TS  
Name JAMES, CAROLYN  
Address 3679 BERRYHILL RD  
City-State-Zip: PACE FL 32571

Title ELDER  
Name STUART, MARK  
Address 3679 BERRYHILL RD  
City-State-Zip: PACE FL 32571

Title ELDER  
Name BROUSSEAU, JEFF  
Address 3679 BERRYHILL RD  
City-State-Zip: PACE FL 32571

*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:** SHERRY MANDEL

TS

01/11/2021

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date