

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000009201

Entity Name: MY FATHER'S HOUSE OF REFUGE, INC.**Current Principal Place of Business:**1601 PRESIDENT BARACK OBAMA HIGHWAY
SUITE 9
RIVIERA BEACH, FL 33404-5413**Current Mailing Address:**717 W. KALMIA DR.
LAKE PARK, FL 33403-2111**FEI Number:** 80-0262733**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LAWRENCE, GUSSIE M
717 W. KALMIA DR.
LAKE PARK, FL 33403-2111 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	PSTD.
Name	LAWRENCE, GUSSIE M
Address	717 W. KALMIA DR.
City-State-Zip:	LAKE PARK FL 33403-2111

Title	SD
Name	WELLS, RENO L
Address	1013 BIG TORCH STREET
City-State-Zip:	RIVIERA BEACH FL 33407

Title	TD
Name	TUCKER, KEVIN
Address	3901 36TH COURT APT.B210
City-State-Zip:	WEST PALM BEACH FL 33407

Title	VP
Name	NEWTON, CALVIN J
Address	5911 NORTHWEST BRIANNA COURT
City-State-Zip:	PORT SAINT LUCIE FL 34986

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: GUSSIE M. LAWRENCE

CEO/PRESIDENT

04/30/2020

Electronic Signature of Signing Officer/Director Detail_____
Date