

2020 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N09000008526

Entity Name: FULL GOSPEL CHRISTIAN CENTER, INC.

Current Principal Place of Business:

159 N. GAINES STREET
OAK HILL, FL 32759

Current Mailing Address:

P.O. BOX 125
OAK HILL, FL 32759 US

FEI Number: 27-1502437

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

GALLOWAY, WILLIAM
2732 YULE TREE DRIVE
EDGEWATER, FL 32141 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: WILLIAM GALLOWAY

08/11/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PASTOR
Name GALLOWAY, WILLIAM REV
Address 2732 YULE TREE
City-State-Zip: EDGEWATER FL 32141

Title EXECUTIVE SECRETARY
Name GALLOWAY, SALLY
Address 2732 YULE TREE
City-State-Zip: EDGEWATER FL 32141

Title TREASURER
Name KEMP, STEPHEN G SR.
Address 3412 LIME TREE DR
City-State-Zip: EDGEWATER FL 32141

Title TRUSTEE
Name MARTINE, MARIE
Address 307 JOAN STREET
City-State-Zip: EDGEWATER FL 32132

Title TRUSTEE
Name JARVIS, FRED R JR.
Address 2016 WOODLAND AVE.
City-State-Zip: NEW SMYRNA BEACH FL 32168

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: WILLIAM GALLOWAY

PASTOR

08/11/2020

Electronic Signature of Signing Officer/Director Detail

Date