

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000006143

Entity Name: REFUGE CHURCH OF OUR LORD JESUS CHRIST OF THE
APOSTOLIC FAITH, INC.**Current Principal Place of Business:**614 NORTH 18TH STREET
PALATKA, FL 32177-3028**Current Mailing Address:**1317 ROWE AVENUE
JACKSONVILLE, FL 32208**FEI Number: 80-0735095****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**GROOVER, GENTLE L. SR.
1317 ROWE AVENUE
JACKSONVILLE, FL 32208 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:** GENTLE L. GROOVER, SR.**03/27/2014**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRES
Name	GROOVER, GENTLE L. SR.
Address	1317 ROWE AVENUE
City-State-Zip:	JACKSONVILLE FL 32208

Title	TRUS
Name	REED, ERSSELL
Address	1159 WEST 23RD STREET
City-State-Zip:	JACKSONVILLE FL 32209

Title	TRUS
Name	GROOVER, KENNETH
Address	935 CHAPMAN DRIVE
City-State-Zip:	JACKSONVILLE FL 32221

Title	TRUS
Name	PARKER, JAMESSENA
Address	520 NORTH 9TH STREET
City-State-Zip:	PALATKA FL 32177

Title	TRUS
Name	REAVES, VERA
Address	133 HOLLISTER CEMETERY ROAD
City-State-Zip:	HOLLISTER FL 32147

Title	TRUS
Name	VICKERS, AGNES
Address	400 NORTH 16TH STREET, APT#B4
City-State-Zip:	PALATKA FL 32177

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: KENNETH GROOVER**TRUSTEE/TREASURER****03/27/2014**

Electronic Signature of Signing Officer/Director Detail

Date