2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2015
Secretary of State
CC8639011054

DOCUMENT# N11063

Entity Name: TRU-WAY CHURCH OF THE RISEN CHRIST, INCORPORATED

Current Principal Place of Business:

%ELWYN W. JENKINS
7155 HYDE GROVE AVE.
JACKSONVILLE, FL 32210

Current Mailing Address:

%ELWYN W. JENKINS
7155 HYDE GROVE AVE.
JACKSONVILLE, FL 32210

FEI Number: 59-2585074

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

JENKINS, ELWYN W
7155 HYDE GROVE AVE.
JACKSONVILLE, FL 32210 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	JENKINS, ELWYN W
Address	7155 HYDE GROVE AVENUE
City-State-Zip:	JACKSONVILLE FL 32210

Title	D
Name	COOPER, LAVERN
Address	3468 RAUMUR VILLA DRIVE
City-State-Zip:	JACKSONVILLE FL 32277

Title	D
Name	SALARY, MARVA J
Address	6825 RHODE ISLAND DR. EAST
City-State-Zip:	JACKSONVILLE FL 32209

Title	DIRECTOR
Name	HOLLEY, ARTEMUS
Address	2037 WOODTOP DR.
City-State-Zip:	JACKSONVILLE FL 32277

Title	TD
Name	MOULTRIE, EUGENE
Address	6030 MEADOW LANE
City-State-Zip:	JACKSONVILLE FL 32211

Title	VT
Name	MCKINNEY, WANDA
Address	2570 BARRY DRIVE
City-State-Zip:	JACKSONVILLE FL 32208

Title	D
Name	JENKINS, VIVIAN B
Address	7155 HYDE GROVE AVE.
City-State-Zip:	JACKSONVILLE FL 32210

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: ELWYN W. JENKINS PRESIDENT/DIRECTOR 01/11/2015

Electronic Signature of Signing Officer/Director Detail — Date