

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000001779

**Entity Name:** SHARON COMMUNITY CHURCH INC

**Current Principal Place of Business:**

327 RED FOX WAY  
GREENVILLE, FL 32331

**Current Mailing Address:**

PO BOX 471  
GREENVILLE, FL 32331

**FEI Number:** 45-4510366

**Certificate of Status Desired:** No

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

THIGPEN, ALBERT  
2640 NW HONEY LAKE RD  
GREENVILLE, FL 32331 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 THIGPEN, ALBERT  
Address 2640 NW HONEY LAKE RD  
City-State-Zip: GREENVILLE FL 32331

Title VP  
Name DUNCAN, PEGGY A  
Address 259 N PINEVIEW RD  
City-State-Zip: MONTICELLO FL 32344

Title S  
Name THIGPEN, BALI  
Address 2640 NW HONEY LAKE RD  
City-State-Zip: GREENVILLE FL 32331

Title T  
Name BARLOW, JAMES LSR  
Address 535 NW RABBIT LOOP  
City-State-Zip: GREENVILLE FL 32331

*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:** ALBERT THIGPEN

**PRESIDENT**

**04/21/2017**

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

\_\_\_\_\_  
Date