

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000008632

Entity Name: TRUTH SEEKERS WORSHIP CENTER, INC.**Current Principal Place of Business:**6800 N.W. 28 AVE.
MIAMI, FL 33147**Current Mailing Address:**19011 NW 24 AVE.
MIAMI, FL 33056 US**FEI Number: 46-1106252****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HUTCHINS, BARRETT
6800 N.W. 28 AVE.
MIAMI, FL 33147 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	HUTCHINS, BARRETT
Address	6800 N.W. 28 AVE.
City-State-Zip:	MIAMI FL 33147

Title	VP
Name	LEE, ALVIN
Address	19011 N.W. 24TH AVE.
City-State-Zip:	MIAMI GARDENS FL 33056

Title	S
Name	GARDENER, BERNICE
Address	1440 N.W. 176TH TERRACE
City-State-Zip:	MIAMI GARDENS FL 33169

Title	D
Name	GREEN, CHARLES
Address	11610 N.W. 18TH STREET
City-State-Zip:	PEMBROKE PINES FL 33026

Title	D
Name	GARDENER, CLEMON
Address	1440 N.W. 176TH TERRACE
City-State-Zip:	MIAMI GARDENS FL 33169

Title	D
Name	LEE, TAMMY
Address	19011 N.W. 24TH AVE.
City-State-Zip:	MIAMI GARDENS FL 33056

Title	D
Name	EXCEUS, CLAUDEL
Address	630 SW 71 TERRACE
City-State-Zip:	PEMBROKE PINES FL 33023

Title	D
Name	HARDEMON, PATRICIA
Address	10641 SW 20TH COURT
City-State-Zip:	MIRAMAR FL 33025

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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: BARRETT O. HUTCHINS**PRESIDENT****04/16/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title	D
Name	MILLER, LAWANDA
Address	830 SOUTH PARK ROAD APT. 4-16
City-State-Zip:	HOLLYWOOD FL 33021