

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000010924

Entity Name: RENOVATION LIFE CHURCH, INC.

Current Principal Place of Business:

2512 BALMORAL DRIVE
KISSIMMEE, FL 34744

Current Mailing Address:

P O BOX 451548
KISSIMMEE, FL 34745-1548 US

FEI Number: 46-4144932

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHOWLER, KAREN
2512 BALMORAL DRIVE
KISSIMMEE, FL 34744 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	PRESIDENT	Title	DIRECTOR
Name	SHOWLER, PHILIP	Name	BENDELE, CHERYL
Address	2512 BALMORAL DRIVE	Address	9701 N. ROAD 33
City-State-Zip:	KISSIMMEE FL 34744	City-State-Zip:	POLK CITY FL 33868
Title	VP, SECRETARY	Title	DIRECTOR
Name	SHOWLER, KAREN	Name	BENDELE, PAUL
Address	2512 BALMORAL DRIVE	Address	9701 N. ROAD 33
City-State-Zip:	KISSIMMEE FL 34744	City-State-Zip:	POLK CITY FL 33868
Title	DIRECTOR	Title	TREASURER
Name	SHOWLER, STEPHEN	Name	SMITH, JILLIAN
Address	3114 COUNTRY VILLA DRIVE	Address	4506 BRANDEIS AVE
City-State-Zip:	MONROE NC 28110	City-State-Zip:	ORLANDO FL 32839
Title	DIRECTOR	Title	DIRECTOR
Name	WATERS, GLENDA	Name	ALICEA, EVELYN
Address	107 COUNTRY MEADOW LANE	Address	1935 HEWETT LANE
City-State-Zip:	KINGS MOUNTAIN NC 28086	City-State-Zip:	MAITLAND FL 32751

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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: KAREN SHOWLER

SECRETARY

03/19/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR

Name HART, JAN

Address 1826 VETERANS DRIVE

City-State-Zip: KINDRED FL 34744