## 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000004563

Entity Name: CANINES FOR CHRIST THERAPY DOG MINISTRY, INC.

FILED Feb 14, 2019 Secretary of State 2167023855CC

Date

Date

## **Current Principal Place of Business:**

3845 EVERGREEN OAKS DR.

LUTZ. FL 33558

## **Current Mailing Address:**

PO BOX 28

LUTZ. FL 33548-0028 US

FEI Number: 46-5668420 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

RANDOLPH, LAWRENCE 3845 EVERGREEN OAKS DR. LUTZ, FL 33558 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

Officer/Director Detail:

Title PD Title TD

Name RANDOLPH, LAWRENCE T Name RANDOLPH, SUSAN D

Address 3845 EVERGREEN OAKS DR. Address 3845 EVERGREEN OAKS DR.

City-State-Zip: LUTZ FL 33558 City-State-Zip: LUTZ FL 33558

Title D Title DIRECTOR

Name LEONARD, RONALD Name KESLER, STEVE

Address 3845 EVERGREEN OAKS DR. Address PO BOX 28

City-State-Zip: LUTZ FL 33558 City-State-Zip: LUTZ FL 33548-0028

Title DIRECTOR Title DIRECTOR

Name CORN, WENDY Name SALGADO, JAMES

Address PO BOX 28 Address 3845 EVERGREEN OAKS DR.

City-State-Zip: LUTZ FL 33548-0028 City-State-Zip: LUTZ FL 33558

Title DIRECTOR
Name PARISH, LESLIE

Address PO BOX 28

City-State-Zip: LUTZ FL 33548-0028

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: LAWRENCE RANDOLPH PRESIDENT 02/14/2019

Electronic Signature of Signing Officer/Director Detail