2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000000500

Entity Name: GOD'S HOUSE: REHABILITATION CENTER FOR THE

HOMELESS, INC.

Current Principal Place of Business:

10935 WINGATE ROAD JACKSONVILLE, FL 32218

Current Mailing Address:

10935 WINGATE ROAD JACKSONVILLE, FL 32218 US

FEI Number: 46-4791446 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COBB, WILLIE T 10935 WINGATE RD JACKSONVILLE, FL 32218 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: WILLIE T COBB 01/27/2023

> Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title CEO, CHAIRMAN Title **DIRECTOR OF MINISTRY**

Name COBB, WILLIE T Name WARREN, TAMMY Address 10935 WINGATE RD Address 121 LAKE RUN BLVD

City-State-Zip: JACKSONVILLE FL 32218 City-State-Zip: JACKSONVILLE FL 32218

Title **TRUSTEE** Title TRUSTFF KNEW, JAY Name COLEMAN, KELVIN Name

Address 289 MUSKEGON AVENUE Address 3543 CLYDE DRIVE

City-State-Zip: JACKSONVILLE FL 32208 City-State-Zip: CALUMET CITY IL 60409

Title **TRUSTEE** Title TRUSTEE

Name MCDONALD, WAYNE Name WARREN, REUBEN T

Address 8243 INTERNATIONAL VILLAGE DRIVE 4822 VERMONT ROAD Address

City-State-Zip: JACKSONVILLE FL 32209 City-State-Zip: JACKSONVILLE FL 32277

Title **TRUSTEE** Title **TRUSTEE**

JOSEPH, ROSALIND Name Name HAGANS, ROSALIND Address 1428 BELLESHORE CIRCLE Address 1715 BUCKMAN STRET JACKSONVILLE FL 32218 City-State-Zip:

City-State-Zip: JACKSONVILLE FL 32206

Continues on page 2

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.

01/27/2023 SIGNATURE: WILLIE COBB CHAIRMAN/CEO

Electronic Signature of Signing Officer/Director Detail

Date

FILED Jan 27, 2023

Secretary of State

1118360468CC

Officer/Director Detail Continued:

Title TRUSTEE

Name COLES, VANESSA

Address 11439 JULIET LEIA COURT
City-State-Zip: JACKSONVILLE FL 32218