## 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000003349

Entity Name: AWAKEN CITY CHURCH, INC.

**Current Principal Place of Business:** 

597 DEER CROSSING ROAD ST AUGUSTINE. FL 32086

**Current Mailing Address:** 

135 JENKINS ST. 105B-307

ST. AUGUSTINE. FL 32086 US

FEI Number: 47-3414261 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALMAGUER, BILLY 597 DEER CROSSING ROAD ST AUGUSTINE, FL 32086 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

**FILED** Jan 16, 2018

**Secretary of State** 

CC1336175668

Officer/Director Detail:

Title Title S

Name ALMAGUER, BILLY Name KUSH, DAVID

Address 508 N. TREE GARDEN DR. Address 1494 VILLA JUNO DR.

City-State-Zip: NORTH PALM BEACH FL 33408 ST. AUGUSTINE FL 32086 City-State-Zip:

Title 0 Title

Name BEARD, TIM GOEPPNER, CHRIS Name

Address 215 PATRIOT WALK CT. Address 36 MOUNTAIN VIEW DR. ALPHARETTA GA 30022 City-State-Zip: LEBANON NH 03766 City-State-Zip:

Title **DIRECTOR** Name CONKLIN, KEVIN

Address 11837 LAUREL GROVE LN.

City-State-Zip: CHARLOTTE NC 28226

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: BILLY ALMAGUER

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

01/16/2018