

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000004823

FILED
Jan 21, 2020
Secretary of State
7416618361CC

Entity Name: CITY POINTE CHURCH, INC.

Current Principal Place of Business:

503 N. PALMER STREET
PLANT CITY, FL 33563

Current Mailing Address:

PO BOX 3507
PLANT CITY, FL 33563 US

FEI Number: 47-4049431

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HOOGLANDER, INGRID
1209 LAKESIDE DR.
BRANDON, FL 33511 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
Name MCINTOSH, LEWIS S
Address PO BOX 3507
City-State-Zip: PLANT CITY FL 33563

Title VP
Name HARROLD, FRED
Address PO BOX 3507
City-State-Zip: PLANT CITY FL 33563

Title TREASURER, SECRETARY
Name BALLARD, LAUREN
Address PO BOX 3507
City-State-Zip: PLANT CITY FL 33563

Title TRUSTEE
Name CLARK, AMY
Address PO BOX 3507
City-State-Zip: PLANT CITY FL 33563

Title TRUSTEE
Name MCDANIEL, JOEL
Address PO BOX 3507
City-State-Zip: PLANT CITY FL 33563

Title TRUSTEE
Name COLLIER, KELLY
Address PO BOX 3507
City-State-Zip: PLANT CITY FL 33563

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: LAUREN BALLARD

TREASURER

01/21/2020

Electronic Signature of Signing Officer/Director Detail

Date