

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000001670

Entity Name: CAMPUS CHURCH, INC.**Current Principal Place of Business:**250 BRENT LANE
PENSACOLA, FL 32523**Current Mailing Address:**250 BRENT LANE
PENSACOLA, FL 32523 US**FEI Number:** 81-1569735**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MCBRIDE, MITCHELL D
250 BRENT LANE
PENSACOLA, FL 32523 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 TRUSTEE
Name SHOEMAKER, TROY DR.
Address 250 BRENT LANE
City-State-Zip: PENSACOLA FL 32503

Title TRUSTEE, PASTOR, PRESIDENT
Name MCBRIDE, DENIS PASTOR
Address 250 BRENT LANE
City-State-Zip: PENSACOLA FL 32503

Title TRUSTEE
Name ATKINS, DALE DR.
Address 5606 EAGLES LANDING
City-State-Zip: PENSACOLA FL 32503

Title TRUSTEE
Name ALLEN, GETTYS MR.
Address 7555 HOWARD DEAN LN.
City-State-Zip: PENSACOLA FL 32526

Title TREASURER
Name THOMPSON, JIM MR.
Address 2032 HAMILTON CROSSING DRIVE
City-State-Zip: CANTONMENT FL 32533

Title SECRETARY
Name SHOEMAKER, DENISE MRS.
Address 250 BRENT LANE
City-State-Zip: PENSACOLA FL 32503

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: JIM THOMPSON**TREASURER****04/18/2018**

Electronic Signature of Signing Officer/Director Detail

Date