

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N16000003297

**Entity Name:** HUMAN'S LIFE GOSPEL MINISTRY INC**Current Principal Place of Business:**2332 SW SAVAGE BLVD  
PORT ST LUCIE, FL 34953**Current Mailing Address:**PO BOX 8484  
PORT ST LUCIE, FL 34985 US**FEI Number: 81-2102979****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**PRIVERT, ACSERGE  
132 NW AVENS ST  
PORT ST LUCIE, FL 34983 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	P
Name	PRIVERT, ACSERGE
Address	132 AVENS ST
City-State-Zip:	PORT ST LUCIE FL 34983

Title	S
Name	ANTENOR, CARLINE
Address	2332 SAVAGE BLVD
City-State-Zip:	PORT ST LUCIE FL 34953

Title	C
Name	PRIVERT, DALMAND
Address	2010 NW 105 ST
City-State-Zip:	MIAMI FL 33147

Title	VP
Name	SAINT FAR, SATURNIDE
Address	2332 SAVAGE BLVD
City-State-Zip:	PORT ST LUCIE FL 34953

Title	T
Name	LAGUERRE, YOLETTE
Address	6130 NW DURIAN ST
City-State-Zip:	PORT ST LUCIE FL 34986

Title	M
Name	TANIS, GUERLINE
Address	19041 NW 5TH CT
City-State-Zip:	MIAMI FL 33169

*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: ACSERGE PRIVERT****PRESIDENT****05/29/2017**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date