

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000011535

Entity Name: FULL LIGHT BAPTIST CHURCH MINISTRIES, INC.**Current Principal Place of Business:**201 SWAIN BLVD
GREENACRES, FL 33463**Current Mailing Address:**201 SWAIN BLVD
GREENACRES, FL 33466 US**FEI Number:** 81-4602773**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MAX, BILLY REV DR.
725 ISLAND SHORES DR
GREENACRES, FL 33413 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:** REV DR BILLY MAX

01/19/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P
Name	MAX, BILLY REV
Address	725 ISLAND SHORES DR
City-State-Zip:	GREENACRESS FL 33413
Title	TREA
Name	CAZEAUX, DANA TREASUR
Address	6174 FOREST HILL BLVD, APT 209
City-State-Zip:	WEST PALM BEACH FL 33415
Title	COUN
Name	CELIN, JEAN D REV
Address	3425 BOULEVARD CHATELAINE
City-State-Zip:	DELRAY BEACH FL 33445
Title	DELEGATE
Name	MAX, EUGINA
Address	412 SOUTH PALM WAY APT. 3
City-State-Zip:	LAKE WORTH FL 33460

Title	VP
Name	PIERRE, CLERVEAUX
Address	713 MEDOW CIRCLE
City-State-Zip:	BOYNTON BEACH FL 33436
Title	SEC
Name	GERMILUS, JEAN HUGUES
Address	4865 NEROS DRIVE
City-State-Zip:	LAKE WORTH FL 33463
Title	ASST. SECRETARY
Name	MAX JOSTIMA, EUGENA
Address	725 ISLAND SHORES DR
City-State-Zip:	GREENACRESS FL 33413

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: REV DR BILLY MAX**PRESIDENT**

01/19/2020

Electronic Signature of Signing Officer/Director Detail

Date