

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19000000100

Entity Name: THE NATIONAL FELLOWSHIP CHURCHES OF GOD, INC.**Current Principal Place of Business:**3545 ST JOHNS BLUFF RD, S, SUITE 1-135
JACKSONVILLE, FL 32224**Current Mailing Address:**3545 ST JOHNS BLUFF RD, S, SUITE 1-135
JACKSONVILLE, FL 32224 US**FEI Number: 58-2678500****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**GRANT, IVAN L SR.
3545 ST JOHNS BLUFF RD, S, SUITE 1-135
JACKSONVILLE, FL 32224 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 DIRECTOR
Name BROWN, TERRY M SR.
Address 3545 ST JOHNS BLUFF RD, S, SUITE 1
-135
City-State-Zip: JACKSONVILLE FL 32224

Title DIRECTOR
Name GRANT, IVAN L JR.
Address 3545 ST JOHNS BLUFF RD, S, SUITE 1
-135
City-State-Zip: JACKSONVILLE FL 32224

Title EXECUTIVE SECRETARY, DIRECTOR
Name GRANT, IRIS E
Address 3545 ST JOHNS BLUFF RD, S, SUITE 1
-135
City-State-Zip: JACKSONVILLE FL 32224

Title PRESIDENT, DIRECTOR
Name GRANT, IVAN L SR.
Address 3545 ST JOHNS BLUFF RD, S, SUITE 1
-135
City-State-Zip: JACKSONVILLE FL 32224

Title DIRECTOR
Name NANCE, FORREST R JR.
Address 3545 ST JOHNS BLUFF RD, S, SUITE 1
-135
City-State-Zip: JACKSONVILLE FL 32224

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: IVAN L GRANT SR**PRESIDING
PRELATE/PRESIDENT****01/31/2020**

Electronic Signature of Signing Officer/Director Detail

Date