

**2024 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL
REPORT**

DOCUMENT# N20000003829

Entity Name: COLLAB. CHURCH INC.

Current Principal Place of Business:

18640 NW 2ND AVE
BOX# 694400
MIAMI, FL 33269-4400

Current Mailing Address:

18640 NW 2ND AVE
BOX# 694400
MIAMI, FL 33269 US

FEI Number: 85-0642013

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DIX, CHANCELLOR
18640 NW 2ND AVE.
BOX# 69440
MIAMI, FL 33269 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 DIX, CHANCELLOR
Address 18640 NW 2ND AVE.
 BOX# 69440
City-State-Zip: MIAMI GARDENS FL 33269

Title TRUSTEE
Name ALEXIS, STEVENSON
Address 18640 NW 2ND AVE
 BOX# 694400
City-State-Zip: MIAMI FL 33269-4400

Title TRUSTEE
Name ATHIS, DENISE
Address 18640 NW 2ND AVE
 BOX# 694400
City-State-Zip: MIAMI FL 33269-4400

Title TRUSTEE
Name MATA, PEDRO
Address 18640 NW 2ND AVE
 BOX# 694400
City-State-Zip: MIAMI FL 33269-4400

Title TRUSTEE
Name POWELL, CLINTON
Address 18640 NW 2ND AVE
 BOX# 694400
City-State-Zip: MIAMI FL 33269-4400

Title VP
Name DIX, JACLYN
Address PO BOX 694400
City-State-Zip: MIAMI FL 33269

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: CHANCELLOR DIX

PRESIDENT

03/02/2024

Electronic Signature of Signing Officer/Director Detail

Date