

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21000012571

Entity Name: UNFOLDING BLESSINGS, INC.

Current Principal Place of Business:

15 SIXTH AVENUE
CRAWFORDVILLE, FL 32327

Current Mailing Address:

15 SIXTH AVENUE
CRAWFORDVILLE, FL 32327 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CEASER, KIMBERLY M
15 SIXTH AVENUE
CRAWFORDVILLE, FL 32327 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 CEASER, KIMBERLY M
Address 15 SIXTH AVENUE
City-State-Zip: CRAWFORDVILLE FL 32327

Title S
Name BROWN, ERICA L
Address 4712 WICKER WAY
City-State-Zip: MOBILE AL 36609

Title T
Name PUGH, EDWARD JR
Address 1105 SOUTHWEST LANE, SUITE 103-240
City-State-Zip: TUSCALOOSA AL 35405

Title MBR
Name CEASER, KIONA M
Address 6625 SAINT ABERNATHY DRIVE
City-State-Zip: SE, MABLETON GA 30126

Title MBR
Name CEASER, KYLA M
Address 208 CROSSINGS DRIVE
City-State-Zip: MILLBROOK AL 36054

Title MBR
Name HILL, COREY
Address 2392 IAN DRIVE
City-State-Zip: TALLAHASSEE FL 32303

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: KIMBERLY M. CEASER

PRESIDENT

09/20/2022

Electronic Signature of Signing Officer/Director Detail

Date