2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31687

Entity Name: SKILLS APPLIED FOR EVANGELISM, INC.

FILED
Mar 17, 2020
Secretary of State
9097630087CC

Current Principal Place of Business:

1216 GOLFVIEW DR.

DAYTONA BEACH, FL 32114

Current Mailing Address:

P.O.BOX 21407

SOUTH DAYTONA, FL 32121

FEI Number: 59-2951557 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DUGAN, VIRGINIA L 1216 GOLFVIEW DR.

DAYTONA BEACH, FL 32114 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 D, HAITIAN REPRESENTATIVE Title D, DIRECTOR, SPIURITUAL ADVISOR

Name PRINSTON, JEROME Name GRAY, BETTY

Address 6901 DENWOOD RD Address 1914 BEVERLY BLVD
City-State-Zip: KNOXVILLE TN 37920 City-State-Zip: SEYMOUR IN 47274

Title EXECUTIVE DIRECTOR Title DIRECTOR, SPIRITUAL COUNSELOR

Name DUGAN, VIRGINIA L Name MARION, STEPHEN

Address 1216 GOLFVIEW DR Address 3440 COUNTRY WALK DR
City-State-Zip: DAYTONA BEACH FL 32114 City-State-Zip: PORT ORANGE FL 32129

Title DIRECTOR, SECRETARY/TREASURER Title DIRECTOR, SGT. ARMS

Name HENRY, LISA Name HENRY, RANDY
Address 1105 W OAK ST Address 1105 W OAK ST

City-State-Zip: BROWNSTOWN IN 47220 City-State-Zip: BROWNSTOWN IN 47220

Title DIRECTOR, TRAINEE MGR.

DIRECTOR

Name DESROSIERS, EMMANUEL

Address 1229 MARDARKE RD.

City-State-Zip: DAYTONA BEACH, FL 32114

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: VIRGINIA DUGAN EXECUTIVE DIRECTOR 03/17/2020

Electronic Signature of Signing Officer/Director Detail

Date