

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001487

Entity Name: WATSON TEMPLE CHURCH OF GOD IN CHRIST, INC.

Current Principal Place of Business:

665 W. BREVARD ST.
TALLAHASSEE, FL 32304

Current Mailing Address:

PO BOX 2576
TALLAHASSEE, FL 32316

FEI Number: 59-2415504

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHEPPARD, DONALD
3103 S. FULMER CIR
TALLAHASSEE, FL 32303 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 T
Name STALLWORTH, FRANCIS
Address 502 DUPONT DR
City-State-Zip: TALLAHASSEE FL

Title TP
Name SHEPPARD, DONALD
Address 3103 S FULMER CIR
City-State-Zip: TALLAHASSEE FL 32303

Title T
Name YOUNG, ESSIE
Address 934 MILLARD ST
City-State-Zip: TALLAHASSEE FL 32301

Title S
Name MINNERS, DENITA
Address 3327 LUCKY DEBONAIR TRAIL
City-State-Zip: TALLAHASSEE FL 32309

Title TRUSTEE
Name WATSON, REGINALD
Address P O BOX 7504
City-State-Zip: TALLAHASSEE FL 32314

Title TRUSTEE
Name WHITE, C. ERICA
Address 3773 ESPLANDE WAY
City-State-Zip: TALLAHASSEE FL 32311

Title TRUSTEE
Name COPPIN, GEOFFREY
Address 5433 PINDERTON WAY
City-State-Zip: TALLAHASSEE FL 32317

Title ELDER
Name COWART, CHRISTOPHER
Address 7016 ALHAMBRA DRIVE
City-State-Zip: TALLAHASSEE FL 32317

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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: DENITA MINNERS

SECRETARY

01/30/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title ELDER

Name AUBER, ERIC

Address P O BOX 5913

City-State-Zip: TALLAHASSEE FL 32314