# JACKSONVILLE, FL 32256 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

#### **Officer/Director Detail :**

Title	MR	Title	MRS
Name	CRUTCHFIELD, LESTER	Name	SANTOS, MARIETTA Y
Address	2531 CEDAR TRACE DR W	Address	12319 SUNCHASE DR
City-State-Zip:	JACKSONVILLE FL 32246	City-State-Zip:	JACKSONVILLE FL 32246
Title	MR	Title	REV
Title Name	MR DIZON, ALEJANDRO DR.	Title Name	REV RANOLA, ROTHAPEL E

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: ROTHAPEL RANOLA

SENIOR PASTOR

01/23/2020 Date

Date

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: Yes

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N96000005988

Entity Name: CHRIST CARES ALLIANCE CHURCH INC.

Name and Address of Current Registered Agent:

#### Current Principal Place of Business:

1620 ST. JOHN'S BLUFF ROAD N JACKSONVILLE, FL 32225

### **Current Mailing Address:**

1620 ST. JOHN'S BLUFF ROAD N JACKSONVILLE, FL 32225

### FEI Number: 59-3037712

RANOLA, ROTHAPEL E 8664 CANOPY OAKS DRIVE