

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003820

Entity Name: THE CITY OF REFUGE APOSTOLIC CHURCH, INC.

Current Principal Place of Business:

9495 S E MARICAMP ROAD
OCALA, FL 34472

Current Mailing Address:

PO BOX 422
CANDLER, FL 32111 US

FEI Number: 59-2848700

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

THOMAS, RUTH
2 EMERALD CRSE
OCALA, FL 34472 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 SEC
Name THOMAS, LORRAINE
Address 2 EMERALD COURSE
City-State-Zip: Ocala FL 34472

Title OFFICER
Name FOSTER, CARMEN
Address 6946 SW 131ST PL.
City-State-Zip: Ocala FL 34473

Title OFFICER
Name DOYLEY, MAVIS
Address 96 PINE COURSE
City-State-Zip: Ocala FL 34472

Title OFFICER
Name BUCHANAN, MICHAEL
Address 114 ALMOND RD
City-State-Zip: Ocala FL 34472

Title OFFICER
Name BROWN, VINCENT
Address 13039 S.W. 79 CIRCLE
City-State-Zip: Ocala FL 34473

Title PASTOR
Name THOMAS, RUTH S
Address 2 EMERALD COURSE
City-State-Zip: Ocala FL 34472

Title TREASURER
Name LEGISTER, ANGELA
Address 532 SPRING LAKE ROAD
City-State-Zip: Ocala FL 34472

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: LORRAINE THOMAS

SECRETARY

04/09/2024

Electronic Signature of Signing Officer/Director Detail

Date