

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N98000004264

**Entity Name:** ABUNDANT LIFE CHURCH OF GOD MINISTRY CORP.

**Current Principal Place of Business:**

95 NW 166 ST  
MIAMI, FL 33169

**Current Mailing Address:**

1616 NE 159 ST  
NORTH MIAMI BEACH, FL 33162

**FEI Number: 65-0856083**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

TIMOTHEE, HENOCK P SR.  
95 NW 166 ST  
MIAMI, FL 33169 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 PD  
Name TIMOTHEE, HENOCK  
Address 95 NW 166 ST  
City-State-Zip: MIAMI FL 33169

Title ST  
Name ERLANDE, JEROME  
Address 1616 NE 159 ST  
City-State-Zip: NORTH MIAMI BEACH FL 33162

Title OTHER, PUBLIC RELATIONS  
Name JOSEPH, YIELDY  
Address 2683 SW 82ND AVE  
City-State-Zip: MIRAMAR FL 33025

Title DEACON, MEMBER  
Name ROSEUS , FRANTZ  
Address 7801 INDIGO STREET  
City-State-Zip: MIARAMAR FL 33023

Title DEACONESS  
Name LUBIN, CHARITABLE NOEL  
Address 828 NW 101 ST  
City-State-Zip: NORTH MIAMI FL 33150

*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: HENOCK TIMOTHEE**

**PRESIDENT/ PASTOR**

**03/15/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date