

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000005659

**Entity Name:** THE WHITE DOVE HOLINESS CHURCH, INC.

**Current Principal Place of Business:**

2609 WEST 25TH STREET  
JACKSONVILLE, FL 32209

**Current Mailing Address:**

P.O. BOX 12045  
JACKSONVILLE, FL 32209 US

**FEI Number: 59-3597775**

**Certificate of Status Desired: No**

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

NEWELL, MARTHENIA  
2609 WEST 25TH STREET  
JACKSONVILLE, FL 32209 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            PRESIDENT, DIRECTOR  
Name            NEWELL, MARTHENIA  
Address        P.O. BOX 12045  
City-State-Zip: JACKSONVILLE FL 32209

Title            TRUSTEE  
Name            CANNADY, RONLINE  
Address        P. O. BOX 12045  
City-State-Zip: JACKSONVILLE FL 32209

Title            CO-TRUSTEE  
Name            REDDICK, JEAN  
Address        P.O. BOX 12045  
City-State-Zip: JACKSONVILLE FL 32209

Title            SECRETARY  
Name            NEWELL, JEROME  
Address        P.O. BOX 12045  
City-State-Zip: JACKSONVILLE FL 32209

*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: MARTHENIA NEWELL**

**PRESIDENT/DIRECTOR**

**04/13/2017**

Electronic Signature of Signing Officer/Director Detail

Date