

**2024 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F04000006065

**FILED**  
**Jan 17, 2024**  
**Secretary of State**  
**3312566114CC**

**Entity Name:** OFFICE OF THE PRESIDING OVERSEER OF THE SEAFARER'S CHURCH OF THE CREATOR AND HIS SUCCESSORS, A CORPORATION  
SOLE

**Current Principal Place of Business:**

1315 SW 5 CT.  
FORT LAUDERDALE, FL 33302

**Current Mailing Address:**

P.O. BOX 502  
FORT LAUDERDALE, FL 33302

**FEI Number: 26-2886955**

**Certificate of Status Desired: No**

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

IRONS, FREDERICK JII  
3255 SW 11 AVE.  
FT. LAUDERDALE, FL 33315 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 IRONS, FREDERICK JII  
Address P.O. BOX 502  
City-State-Zip: FORT LAUDERDALE FL 33302

Title D  
Name ARPIN, THEODORE J  
Address 2430 SW 130 AVENUE  
City-State-Zip: DAVIE FL 33325

Title D  
Name WEBSTER, ROBERT D  
Address 1436 NW 2ND AVENUE  
City-State-Zip: FORT LAUDERDALE FL 33311

Title D  
Name FALCEY, TERRENCE  
Address 851 NE 207 TERRACE, APT 202, BLDG 6  
City-State-Zip: MIAMI FL 33179

Title D  
Name IRONS, JUDY L  
Address 1315 SW 5 COURT  
City-State-Zip: FORT LAUDERDALE FL 33302

*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: FREDERICK JOHN IRONS II**

**PD**

**01/17/2024**

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

\_\_\_\_\_  
Date