| | | | •••••••••••••• | |
|--|--|-----------------|------------------------|------------|
| Name and Address of Current Registered Agent: | | | | |
| DAVIS, DR CLARENCE 1801 ANASTASIA WAY SOUTH ST PETERSBURG, FL 33712 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 | E: DR CLARENCE DAVIS | | | 03/17/2020 |
| | Electronic Signature of Registered Agent | | | Date |
| Officer/Director Detail : | | | | |
| Title | PD | Title | D | |
| Name | DAVIS, CLARENCE E PHD | Name | WILBURN, JAMESINA | |
| Address | 1801 ANASTASIA WAY S | Address | 2716 NORTH 34TH STREET | |
| City-State-Zip: | SAINT PETERSBURG FL 33712 | City-State-Zip: | TAMPA FL 33605 | |
| Title | D | | | |
| Name | DAVIS, ADA B | | | |
| Address | 1801 ANASTASIA WAY SOUTH | | | |
| City-State-Zip: | ST PETERSBURG FL 33712 | | | |

2716 NORTH 34TH STREET TAMPA FL 33605 US

FEI Number: 59-2754198

N

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: DR CLARENCE E DAVIS SR

PRESIDENT

03/17/2020

Date

Electronic Signature of Signing Officer/Director Detail

FILED Mar 17, 2020

Certificate of Status Desired: Yes

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702930

Entity Name: JESUS' CHURCH MINISTRIES OF TAMPA, INC.

Current Principal Place of Business:

2716 NORTH 34TH STREET TAMPA, FL 33605

Current Mailing Address: