

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704875

Entity Name: FIRST ASSEMBLY OF GOD, INC., OF PALATKA, FLORIDA**Current Principal Place of Business:**3111 ST. JOHNS AVENUE
PALATKA, FL 32177-4131**Current Mailing Address:**3111 ST. JOHNS AVENUE
PALATKA, FL 32177-4131**FEI Number:** 59-2240885**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**STACKPOLE, THEODORE
1 PUTTER LANE
PALATKA, FL 32177 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	P/D
Name	STACKPOLE, THEODORE
Address	1 PUTTER LANE
City-State-Zip:	PALATKA FL 32177

Title	DIRECTOR
Name	RYAN, TOMMY
Address	119 POINT OF WOODS TRAIL
City-State-Zip:	PALATKA FL 32177

Title	TREASURER
Name	CRAVENS, KYLE
Address	131 CRESTWOOD AVE
City-State-Zip:	PALATKA FL 32177

Title	DIRECTOR
Name	BROWN, MALCOLM
Address	2106 CARR ST.
City-State-Zip:	PALATKA FL 32177

Title	DIRECTOR
Name	URVINA, DAVID
Address	110 ST. JOHNS BLVD.
City-State-Zip:	EAST PALATKA FL 32177

Title	DIRECTOR
Name	SANCHEZ MUNIZ, JUAN
Address	6710 ST. JOHNS AVE #423
City-State-Zip:	PALATKA FL 32177

Title	SECRETARY
Name	ZIEGLER, THOMAS KARL
Address	7300 CRILL AVENUE #32
City-State-Zip:	PALATKA FL 32177

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: THEODORE STACKPOLE

PRESIDENT

02/28/2017

Electronic Signature of Signing Officer/Director Detail_____
Date