

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707147

FILED
Apr 29, 2016
Secretary of State
CC0685844798

Entity Name: BLESSED ASSURANCE TEMPLE INCORPORATED

Current Principal Place of Business:

1245 S. MCADOO AVE.
BARTOW, FL 33830

Current Mailing Address:

C/O MATTHEW CLARK
1230 S MCADOO AVE
BARTOW, FL 33830

FEI Number: 59-2607990

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CLARK, MATTHEW P
1230 S MCADOO AVE
BARTOW, FL 33830 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 TD
Name CLARK, CHARLOTTE Y
Address 1695 S EMERSON AVE
City-State-Zip: BARTOW FL 33830

Title PD
Name CLARK, MATTHEW P
Address 1230 S MCADOO AVE
City-State-Zip: BARTOW FL 33830

Title SD
Name FORRISTER, MEGHAN D
Address 740 GRACE CT
City-State-Zip: BARTOW FL 33830

Title ATD
Name CLARK, RUBY G
Address 1921 GRIFFINS GREEN DR
City-State-Zip: BARTOW FL 33830

Title VD
Name CLARK, CHRISTOPHER J
Address 1921 GRIFFINS GREEN DR
City-State-Zip: BARTOW FL 33830

Title D
Name FORRISTER, RAYMOND T
Address 740 GRACE CT
City-State-Zip: BARTOW FL 33830

Title D
Name JACKSON, EDWARD
Address 3325 HWY 98 S
LOT 14
City-State-Zip: LAKELAND FL 33803

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: CHARLOTTE Y CLARK

TD

04/29/2016

Electronic Signature of Signing Officer/Director Detail

Date