

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 707147

**FILED**  
**Apr 29, 2019**  
**Secretary of State**  
**7280514318CC**

**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:** No

**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	Title	PD
Name	CLARK, CHARLOTTE Y	Name	CLARK, MATTHEW P
Address	1695 S EMERSON AVE	Address	1230 S MCADOO AVE
City-State-Zip:	BARTOW FL 33830	City-State-Zip:	BARTOW FL 33830
Title	SD	Title	ATD
Name	FORRISTER, MEGHAN D	Name	CLARK, HEATHER
Address	740 GRACE CT	Address	1230 S MCADOO AVE
City-State-Zip:	BARTOW FL 33830	City-State-Zip:	BARTOW FL 33830
Title	VD	Title	D
Name	BURGESS, APRIL R	Name	FORRISTER, RAYMOND T
Address	1915 WIND MEADOWS DR.	Address	740 GRACE CT
City-State-Zip:	BARTOW FL 33830	City-State-Zip:	BARTOW FL 33830
Title	D		
Name	CLARK, STEVEN J		
Address	1695 S EMERSON AVE		
City-State-Zip:	BARTOW FL 33830		

*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

04/29/2019

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

\_\_\_\_\_  
Date