

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707805

Entity Name: SONRISE WORSHIP CENTER, INC.**Current Principal Place of Business:**600 LEVY ROAD
ATLANTIC BEACH, FL 32233**Current Mailing Address:**600 LEVY ROAD
ATLANTIC BEACH, FL 32233**FEI Number:** 59-3696312**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**STALLWORTH, SANFORD LEON
12350 BENTON HARBOR DR S
JACKSONVILLE, FL 32225 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:** SANFORD LEON STALLWORTH

03/10/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PD
Name	STALLWORTH, SANFORD LEON
Address	12350 BENTON HARBOR DR S
City-State-Zip:	JACKSONVILLE FL 32225

Title	VPD
Name	COBBLE, BOBBY J
Address	2477 WEST END COURT
City-State-Zip:	ATLANTIC BEACH FL 32233

Title	ST
Name	STALLWORTH, CATHERINE ELIZABETH
Address	12350 BENTON HARBOR DR S
City-State-Zip:	JACKSONVILLE FL 32225

Title	TR
Name	COBBLE, RITA
Address	2477 WEST END COURT
City-State-Zip:	ATLANTIC BEACH FL 32233

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: SANFORD LEON STALLWORTH

PD

03/10/2021

Electronic Signature of Signing Officer/Director Detail

Date