

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710649

Entity Name: OAK GROVE CHURCH OF GOD, INC.**Current Principal Place of Business:**6830 NORTH HABANA
TAMPA, FL 33614**Current Mailing Address:**6830 NORTH HABANA
TAMPA, FL 33614**FEI Number:** 59-2449214**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BAKER, DIANA
4206 HOLLOWTRAIL DR.
TAMPA, FL 33624 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 OFFICER, SECRETARY/TREASURER
Name VAUGHN, BOYER
Address 6109 FRONTAGE ROAD
City-State-Zip: TAMPA FL 33617

Title DIRECTOR
Name MORALES, HARRY
Address 11349 HOLLYGLEN DRIVE
City-State-Zip: TAMPA FL 33624

Title PASTOR
Name KIER, KAREN
Address 15914 SHAWVER LAKE DRIVE
City-State-Zip: LUTZ FL 33549

Title DIRECTOR
Name ACEVEDO, EDUVIGES
Address 2957 WILLOWLEAF LANE
City-State-Zip: WESLEY CHAPEL FL 33544

Title DIRECTOR
Name CRESS, SANDRA
Address 3851 CRYSTAL DEW STREET
City-State-Zip: PLANT CITY FL 33567

Title DIRECTOR, CHAIRMAN
Name MCCAFFREY, MICHELLE
Address 15749 GARDENSIDE LANE
City-State-Zip: TAMPA FL 33624

Title OFFICER, VC
Name ACEVEDO, JUNIOR RAFAEL
Address 15831 KNOLLVIEW DRIVE
City-State-Zip: TAMPA FL 33624

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: VAUGHN BOYER**OFFICER,
SECRETARY/TREASURER****03/11/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date