

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726457

Entity Name: FAITH FELLOWSHIP CHURCH OF BROOKSVILLE, INC.**Current Principal Place of Business:**19255 CAMPGROUND RD
BROOKSVILLE, FL 34601**Current Mailing Address:**P.O. BOX 5863
SPRING HILL, FL 34611 US**FEI Number:** 23-7287115**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HALL, WARD L DR.
3366 ABELINE RD
SPRING HILL, FL 34608 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:** DR. WARD L. HALL

03/03/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PASTOR
Name HALL, WARD
Address 3366 ABELINE ROAD
City-State-Zip: SPRING HILL FL 34608

Title BM
Name GALLAHER, PHILLIP
Address 6397 LANDOVER BOULEVARD
City-State-Zip: SPRING HILL FL 34608

Title SECRETARY, TREASURER
Name HALL, THELMA
Address 3366 ABELINE ROAD
City-State-Zip: SPRING HILL FL 34608

Title BM
Name MEINHARDT, CHARLOTTE
Address 8459 MORNINGSIDE DRIVE
City-State-Zip: BROOKSVILLE FL 34601

Title BM
Name VALDES, SHERRY HALL
Address 1326 SALEM CT
City-State-Zip: SPRING HILL FL 34606

Title BM
Name POTTLE, ALBERT
Address 14190 DEL SILVER DR
City-State-Zip: BROOKSVILLE FL 34613

Title BM
Name OWENS, PEGGY A
Address 27149 SIMONA AVENUE
City-State-Zip: BROOKSVILLE FL 34602

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: THELMA HALL**SECRETARY/TREASURER** 03/03/2023

Electronic Signature of Signing Officer/Director Detail

Date