2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737569

Entity Name: CHURCH OF THE INCARNATION, INC.

Current Principal Place of Business:

1835 N.W. 54TH ST. MIAMI. FL 33142

Current Mailing Address:

PO BOX 420050 MIAMI, FL 33142 US

FEI Number: 59-1350900 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MOSS, KATHLEEN R. 1835 N.W. 54TH ST. MIAMI, FL 33142 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: KATHLEEN R. MOSS 02/26/2025

Electronic Signature of Registered Agent

Date

FILED Feb 26, 2025

Secretary of State

0109193206CC

Officer/Director Detail:

Title OFFICER, SENIOR WARDEN Title OFFICER, TREASURER POWELL, JR, LOUIS FI MOSS, KATHLEEN R. Name Name 1835 N.W. 54TH ST. Address 1835 N.W. 54TH ST. Address City-State-Zip: MIAMI FL 33142 MIAMI FL 33142 City-State-Zip:

Title OFFICER, JUNIOR WARDEN Title OFFICER, CLERK

Name ANDERSON, JR, WILLIAM Name MARSH, MARGARET BARR

 Address
 1835 N.W. 54TH ST.
 Address
 1835 N.W. 54TH ST.

 City-State-Zip:
 MIAMI FL 33142
 City-State-Zip: MIAMI FL 33142

ASSISTANT TREASURER Title RECTOR AND CEO Title Name WILLIAMS, ANNETTE K KNOWLES, ROBERTA Name Address 1835 N.W. 54TH ST. 1835 N.W. 54TH ST. Address City-State-Zip: MIAMI FL 33142 MIAMI FL 33142 City-State-Zip:

Title ASSISTANT TREASURER Title VESTRY MEMBER

Name BURROUGHS, CYNTHIA RAFI Name JACKSON, ALFREDA CURRY

 Address
 1835 N.W. 54TH ST.
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 MIAMI FL 33142
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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: KATHLEEN R MOSS TREASURER 02/26/2025

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title VESTRY MEMBER
Name BELL, JAMES
Address 1835 N.W. 54TH ST.

City-State-Zip: MIAMI FL 33142

Title VESTRY MEMBER
Name KNOWLES, SYLVIA
Address 1835 N.W. 54TH ST.

City-State-Zip: MIAMI FL 33142

Title VESTRY MEMBER

Name MCKINNEY, ALSTENE LYNCH

Address 1835 N.W. 54TH ST. City-State-Zip: MIAMI FL 33142

Title VESTRY MEMBER

Name WALKER WATSON, ANDREW

Address 1835 N.W. 54TH ST.
City-State-Zip: MIAMI FL 33142

Title VESTRY MEMBER
Name JOHNSON, THEODORE
Address 1835 N.W. 54TH ST.
City-State-Zip: MIAMI FL 33142

Title VESTRY MEMBER
Name ROBINSON, TYEASA
Address 1835 N.W. 54TH ST.
City-State-Zip: MIAMI FL 33142

Title VESTRY MEMBER
Name PRATT, ROSA HARVEY
Address 1835 N.W. 54TH ST.
City-State-Zip: MIAMI FL 33142