

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742554

Entity Name: ROCK OF AGES GOSPEL BAPTIST CHURCH, INC.**Current Principal Place of Business:**7604 SMYRNA STREET
JACKSONVILLE, FL 32208**Current Mailing Address:**11574 SUNKEN MEADOW CT
JACKSONVILLE, FL 32218 US**FEI Number: 59-1790948****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**WILLIAMS, BENJAMIN W
11574 SUNKEN MEADOW CT
JACKSONVILLE, FL 32218 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: BENJAMIN W WILLIAMS****04/05/2022**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PASTOR
Name	WILLIAMS, BENJAMIN W
Address	11574 SUNKEN MEADOW CT
City-State-Zip:	JACKSONVILLE FL 32218

Title	TD
Name	BROOKS, CATHERINE
Address	4162 OWENS AVE
City-State-Zip:	JACKSONVILLE FL 32209

Title	D
Name	WILLIAMS, DORIS L
Address	5710 EARL CIRCLE NORTH
City-State-Zip:	JACKSONVILLE FL 32219

Title	SD
Name	WILLIAMS, KENNETH L
Address	P,O,BOX 37918
City-State-Zip:	JACKSONVILLE FL 32236

Title	VC
Name	WILLIAMS, SAMUEL
Address	40 UPLAND LANE
City-State-Zip:	OXFORD GA 30054

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: BENJAMIN WILLIAMS**PASTOR****04/05/2022**

Electronic Signature of Signing Officer/Director Detail

Date