LAKE BUTLER	, FL 32054				
Current Ma	iling Address:				
5609 W CR LAKE BUTL	240 ER, FL 32054 US				
FEI Number	r: 59-2116538	Certificate of Status Desired: Yes			
Name and Address of Current Registered Agent:					
ALISA MADDU 5609 W CR 240	0				
LAKE BUTLER	, FL 32054 US				
	, FL 32054 US	registered office or regis	tered agent, or both, in the State of F	-lorida.	
The above name		registered office or regis	tered agent, or both, in the State of F	Florida. 03/10/2023	
The above name	d entity submits this statement for the purpose of changing its	registered office or regis	tered agent, or both, in the State of F		
The above name SIGNATURI	d entity submits this statement for the purpose of changing its E: <u>ALISA MADDUX</u>	s registered office or regis	tered agent, or both, in the State of F	03/10/2023	
The above name SIGNATURI	d entity submits this statement for the purpose of changing its E: ALISA MADDUX Electronic Signature of Registered Agent	registered office or regis	tered agent, or both, in the State of F	03/10/2023	
The above name SIGNATURI Officer/Dire	d entity submits this statement for the purpose of changing its E: ALISA MADDUX Electronic Signature of Registered Agent			03/10/2023	
The above name SIGNATURI Officer/Dire Title	d entity submits this statement for the purpose of changing its E: ALISA MADDUX Electronic Signature of Registered Agent Ctor Detail : PD	Title	STD	03/10/2023	

Address

City-State-Zip:

12576 NW 59TH PLACE

LAKE BUTLER FL 32054

Name	DORMAN, BELVELY	Name	MADDUX, ALISA
Address	635 NE 1ST STREET	Address	5609 W CR 240
City-State-Zip:	LAKE BUTLER FL 32054	City-State-Zip:	LAKE BUTLER FL 32054
Title	VD	Title	ASST. TREASURER

S	635 NE 1ST STREET	Address	5609 W CR 240
ate-Zip:	LAKE BUTLER FL 32054	City-State-Zip:	LAKE BUTLER FL 3
	VD	Title	ASST. TREASURER
	FORD, JOHN	Name	TILTON, MARTHA

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: ALISA MADDUX

STD

03/10/2023

Date

Electronic Signature of Signing Officer/Director Detail

**FILED** Mar 10, 2023 **Secretary of State** 8115162723CC

## 2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# 751034

Entity Name: THE UNITED CHURCH OF JESUS CHRIST, OF THE APOSTOLIC PENTECOSTAL FAITH, INC.

## **Current Principal Place of Business:**

5609 W. CR 240

Name Address

18217 SE COUNTY ROAD 2082

City-State-Zip: HAWTHORNE FL 32640