

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753577

Entity Name: GOSPEL TEMPLE OF PENSACOLA, FLORIDA, INC.**Current Principal Place of Business:**3626 NORTH Q STREET
PENSACOLA, FL 32505**Current Mailing Address:**3626 NORTH Q STREET
PENSACOLA, FL 32505 US**FEI Number: 59-2502588****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**SMITH, WILLIE MRA
2220 W. HERMAN AVE
PENSACOLA, FL 32505 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	VP/S
Name	MITCHELL, BRENDA
Address	3089 MYRSHINE DR.
City-State-Zip:	PENSACOLA FL 32506

Title	D
Name	REDMOND, RAYMOND C
Address	99 JUNIPER ST
City-State-Zip:	WALNUT HILL FL 32568

Title	PRESIDENT
Name	SMITH, WILLIE M
Address	2220 WEST HERMAN AVE
City-State-Zip:	PENSACOLA FL 32505

Title	T
Name	RHODES, DELOIS
Address	6207 CHICAGO AVE
City-State-Zip:	PENSACOLA FL 32526

Title	D
Name	BARNES, CAROLYN R
Address	4101 WEST NAVY BLVD. APT #2103
City-State-Zip:	PENSACOLA FL 32507

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: WILLIE MAE SMITH**PRESIDENT****01/19/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date