

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000000843

**Entity Name:** DOMINION AND POWER CHURCH OF GOD IN CHRIST, INC.

**FILED**  
**Jan 29, 2015**  
**Secretary of State**  
**CC0930898272**

**Current Principal Place of Business:**

1115 N DR MARTIN LUTHER KING JR BLVD  
CLEARWATER, FL 33755

**Current Mailing Address:**

P.O. BOX 4288  
TAMPA, FL 33677

**FEI Number: 59-3657070**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

WILLIAMS, ISIAH JSR.  
1115N DR MARTIN LUTHER KING JR BLVD  
CLEARWATER, FL 33755 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            PP  
Name            WILLIAMS, ISIAH JSR.  
Address        2916 W. BEACH STREET  
City-State-Zip: TAMPA FL 33607

Title            TR  
Name            WILLIAMS, LINDA Y  
Address        2916 W. BEACH STREET  
City-State-Zip: TAMPA FL 33607

Title            TR  
Name            SMITH, BENNIE  
Address        3306 E. 33RD AVE.  
City-State-Zip: TAMPA FL 33610

Title            TR  
Name            LEMONS, WANDA  
Address        2607 N. LINCOLN AVE.  
City-State-Zip: TAMPA FL 33607

Title            TR  
Name            WILLIAMS, CHRISTINA L  
Address        4037 BISMARCK PALM DR  
City-State-Zip: TAMPA FL 33610

*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: ISIAH J WILLIAMS, SR.**

**PP**

**01/29/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date