

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007711

Entity Name: THE APOSTLE FAITH MIRACLE CHURCH INC.

Current Principal Place of Business:

1177 E. 14TH ST.
JACKSONVILLE, FL 32206

Current Mailing Address:

P.O. BOX 40534
JACKSONVILLE, FL 32203 US

FEI Number: 59-3700024

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

JONES, DR. A SR
4430 MELVIN CIRCLE WEST
JACKSONVILLE, FL 32210 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: DR. A. L. JONES, SR.

04/16/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title B
Name JONES, ALVIN LEONARD DR.
Address 4430 MELVIN CIRCLE WEST
City-State-Zip: JACKSONVILLE FL 32210

Title P
Name JONES, MURRIA M
Address 4430 MELVIN CIRCLE WEST
City-State-Zip: JACKSONVILLE FL 32210

Title S
Name FELDER, MARILYN
Address 12282 DRIFT CT.
City-State-Zip: JACKSONVILLE FL 32218

Title T
Name MARSHALL, SHARRON
Address 4430 MELVIN CIRCLE WEST
City-State-Zip: JACKSONVILLE FL 32208

Title D
Name WILLIAMS, ANGELA
Address 4430 MELVIN CIRCLE WEST
City-State-Zip: JACKSONVILLE FL 32210

Title DIRECTOR
Name FELDER, AUDREY
Address 364 AQUARIUS CONCOURSE
City-State-Zip: ORANGE PARK FL 32073

Title DIRECTOR
Name FELDER, DONDRELL
Address 12282 DRIFT COURT
City-State-Zip: JACKSONVILLE FL 32218

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: FELDER, MARILYN

SECRETARY

04/16/2024

Electronic Signature of Signing Officer/Director Detail

Date