

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007814

Entity Name: CHRISTIAN FELLOWSHIP WORSHIP CENTER FOR ALL PEOPLE, INC.**FILED**
Mar 26, 2021
Secretary of State
7896433530CC**Current Principal Place of Business:**13700 NW 19TH AVENUE
OPA-LOCKA, FL 33054**Current Mailing Address:**18130 NW 56TH AVE
MIAMI, FL 33055**FEI Number: NOT APPLICABLE****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**JACKSON, JOY L
18130 NW 56TH AVENUE
MIAMI, FL 33055 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 DP
Name JACKSON, JOY L
Address 18130 NW 56TH AVE
City-State-Zip: MIAMI FL 33055Title DV
Name WILLIAMS, BELINDA
Address 3128 NW 45TH STREET
City-State-Zip: MIAMI FL 33142Title DT, SECRETARY
Name SMITH, KARLA
Address 20621 NE 1ST COURT
City-State-Zip: MIAMI FL 33179Title DT
Name SMITH, WILLIE
Address 20621 NE 1ST CT
City-State-Zip: MIAMI FL 33179Title TRUSTEE
Name MAXWELL, SANDRA
Address 20268 NW 38TH PLACE
City-State-Zip: MIAMI GARDENS FL 33055

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: KARLA SMITH**DT, SECRETARY****03/26/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date