

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000291

Entity Name: GOSPEL TRUTH MINISTRIES INC.**Current Principal Place of Business:**3959 ALLERDALE PLACE
COCONUT CREEK, FL 33073**Current Mailing Address:**PO BOX 971136
COCONUT CREEK, FL 33097 US**FEI Number:** 26-0036539**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WHITFIELD, JAMES
3959 ALLERDALE PLACE
COCONUT, FL 33073 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 | PRES |
| Name | WHITFIELD, JAMES |
| Address | PO BOX 971136 |
| City-State-Zip: | COCONUT CREEK FL 33097 |

| | |
|-----------------|------------------------|
| Title | SEC |
| Name | GERRELL, JENNIFER |
| Address | PO BOX 971136 |
| City-State-Zip: | COCONUT CREEK FL 33097 |

| | |
|-----------------|------------------------|
| Title | VP |
| Name | MCKENZIE, NICOLE |
| Address | PO BOX 971136 |
| City-State-Zip: | COCONUT CREEK FL 33097 |

| | |
|-----------------|------------------------|
| Title | COO |
| Name | LEE, EBONY |
| Address | PO BOX 971136 |
| City-State-Zip: | COCONUT CREEK FL 33097 |

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: JAMES WHITFIELD**PRES****05/07/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date