

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003518

Entity Name: EPPS CHRISTIAN CENTER, INC.**Current Principal Place of Business:**2300 NORTH PLACE BLVD
PENSACOLA, FL 32505**Current Mailing Address:**POST OFFICE BOX 1564
PENSACOLA, FL 32591 US**FEI Number: 36-4495645****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**TISDALE, SYLVIA E
6250 COLLEGE BLVD
PENSACOLA, FL 32504 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 DIRECTOR
Name HALL, LEE BISHOP
Address 1887 SUNDOWN DRIVE
City-State-Zip: NAVARRE FL 32566

Title SECRETARY
Name HALE, REBECCA
Address 2257 N. BAYLEN ST.
City-State-Zip: PENSACOLA FL 32501

Title DIRECTOR
Name DUKES, JANNETTA
Address 2828 PTARMIGAN RD
City-State-Zip: HEPHIZIBAH GA 30815

Title DIRECTOR
Name AVANT, CALVIN DR.
Address 7820 CASTLEGATE DR.
City-State-Zip: PENSACOLA FL 32534

Title DIRECTOR
Name TOMS, ANDREW
Address 711 NOWAK ROAD
City-State-Zip: CANTONMENT FL 32533

Title PRESIDENT
Name TISDALE, JOSHUA
Address 6250 COLLEGE BLVD
City-State-Zip: PENSACOLA FL 32504

Title TREASURER
Name GRIER, TIMOTHY
Address 1996 LARKSPUR CIRCLE
City-State-Zip: PENSACOLA FL 32534

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: JOSHUA TISDALE**OFFICER****01/18/2020**

Electronic Signature of Signing Officer/Director Detail

Date