## 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002038

Entity Name: TRUE VINE APOSTOLIC FAITH HOLINESS CHURCH, INC.

FILED
Apr 05, 2017
Secretary of State
CC7236715487

## **Current Principal Place of Business:**

16248 MT SPARROW ROAD WEEKI WACHEE, FL 34614

## **Current Mailing Address:**

P. O. BOX 5142

SPRING HILL, FL 34611 US

FEI Number: 32-0080728 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

PARFITT, WANDA FAYE 16248 MT SPARROW ROAD WEEKI WACHEE, FL 34614 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: WANDA FAYE PARFITT 04/05/2017

Electronic Signature of Registered Agent

Officer/Director Detail:

Title PE Title V

Name PARFITT, WANDA FAYE Name PARFITT, WANDA F

Address 16248 MT SPARROW ROAD Address PO BOX 5142

City-State-Zip: WEEKI WACHEE FL 34614 City-State-Zip: SPRING HILL FL 34611

Title S Title T

Name JEFFERSON, KIMBERLY L Name FOLKS, WANDEZ M

Address P.O. BOX 5142 Address 4640 ASHBURN SQUARE DRIVE

City-State-Zip: SPRING HILL FL 34611 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: WANDA FAYE PARFITT

04/05/2017

Date