I hereby certify that the information indicated on this report or supplemental report is true and accura oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execu above, or on an attachment with all other like empowered.		
SIGNATURE ROBERT NEWELL	DIRECTOR	01/12/2021

SIGNATURE: ROBERT NEWELL

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# N03000010798

Entity Name: FAMILY WORSHIP CENTER CHIPLEY INC

Current Principal Place of Business:

531 ROCKHILL CHURCH RD CHIPLEY, FL 32428

Current Mailing Address:

1997 DUNCAN COMMUNITY RD CHIPLEY. FL 32428

FEI Number: 90-0114005

Name and Address of Current Registered Agent:

NEWELL, ROBERT 1997 DUNCAN COMMUNITY RD CHIPLEY, FL 32428 US

City-State-Zip: CHIPLEY FL 32428

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:

Officer/Director Detail : Title Title D D Name NEWELL, ROBERT Name PETERSON, TOMMY Address 1997 DUNCAN COMMUNITY RD Address 1014 BEREAN CT.

Electronic Signature of Registered Agent

City-State-Zip: CHIPLEY FL 32428

Certificate of Status Desired: No

Date

FILED Jan 12, 2021 Secretary of State 7013231669CC

DIRECTOR

Date