

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007796

Entity Name: FAMILY LIFE ASSEMBLY OF GOD, INC.

Current Principal Place of Business:

4325 SW 95TH STREET
OCALA, FL 34476

Current Mailing Address:

4325 SW 95TH STREET
OCALA, FL 34476 US

FEI Number: 56-2475823

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HILL, REV. CHARLES
3535 SE 19TH AVE.
OCALA, FL 34471 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 P
Name HILL, REV. CHARLES
Address 3535 SE 19TH AVE.
City-State-Zip: Ocala FL 34471

Title SECRETARY
Name HILL, JONATHAN DAVID
Address 10590 SW 45TH CT
City-State-Zip: Ocala FL 34476

Title S
Name HILL, SHEILA M
Address 3535 SE 19TH AVE.
City-State-Zip: Ocala FL 34471

Title TRUSTEE
Name MARKHAM, THOMAS
Address 5901 SW 108TH ST
City-State-Zip: Ocala FL 34476

Title TRUSTEE
Name DEAN, TERRY
Address 10380 SW 48TH AVE
City-State-Zip: Ocala FL 34476

Title TRUSTEE
Name ANTHONY, DONNA
Address 5078 SW 107TH LOOP
City-State-Zip: Ocala FL 34476

Title TRUSTEE
Name DOMINGUEZ, LEANNA
Address 7409 SW 100TH PLACE
City-State-Zip: Ocala FL 34476

Title TRUSTEE
Name CAMPBELL, JANEIL
Address 10195 SW 38TH AVE.
City-State-Zip: Ocala FL 34476

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: JONATHAN DAVID HILL

VICE PRESIDENT

03/05/2020

Electronic Signature of Signing Officer/Director Detail

Date