

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003734

Entity Name: CRYSTAL SPRINGS WORSHIP CENTER INC.

Current Principal Place of Business:

2155 PAUL BUCHMAN HIGHWAY
CRYSTAL SPRINGS, FL 33524

Current Mailing Address:

P.O. BOX 520
CRYSTAL SPRINGS, FL 33524

FEI Number: 13-4296843

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STRICKLAND, JOHN
4626 KEENE ROAD
PLANT CITY, FL 33865 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 PVD
Name STRICKLAND, JOHN
Address 4626 KEENE ROAD
City-State-Zip: PLANT CITY FL 33565

Title DIRECTOR
Name PROCTOR, TIM
Address 4706 LAMAR
City-State-Zip: ZEPHYRHILLS FL 33541

Title DIRECTOR
Name GALYAN, JOEY
Address 4611 COURT STREET
City-State-Zip: ZEPHYRHILLS FL 33541

Title STD
Name JARVIS, MARJORIE A
Address 37919 NICK AVENUE
City-State-Zip: ZEPHYRHILLS FL 33542

Title DIRECTOR
Name BIRBECK, ALBERT C
Address 38521 NAOMI AVENUE
City-State-Zip: ZEPHYRHILLS FL 33542

Title DIRECTOR
Name FERRY, RON
Address 38335 IRONWOOD PLACE
City-State-Zip: ZEPHYRHILLS FL 33542

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: MARJORIE JARVIS

SECRETARY

02/05/2018

Electronic Signature of Signing Officer/Director Detail

Date