

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010744

Entity Name: LIGHT EVANGELISM MINISTRY, INC.**Current Principal Place of Business:**1016 DEASON ST
PENSACOLA, FL 32505**Current Mailing Address:**P.O. BOX 4427
PENSACOLA, FL 32507**FEI Number:** 20-3553497**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FINLEY, GAVIN W DR.
5109 HIGH POINT DR
PENSACOLA, FL 32505 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:** GAVIN W FINLEY

03/12/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRES
Name DAHN, GN-KEWON M
Address 1016 DEASON ST
City-State-Zip: PENSACOLA FL 32505

Title DIR.
Name FINLEY, GAVIN W
Address 5109 HIGH POINT DR
City-State-Zip: PENSACOLA FL 32505

Title DIR
Name SMITH, BRIAN
Address 781 HALCYON CIRCLE
City-State-Zip: PENSACOLA FL 32506

Title DIR
Name SMITH, EMILY
Address 781 HALCYON CIRCLE
City-State-Zip: PENSACOLA FL 32506

Title DIRECTOR
Name WATSON, JERRY
Address 1520 TEMPLEMORE DR
City-State-Zip: CANTONEMENT FL 32533

Title DIRECTOR
Name PAGAN, BRETT
Address 4736 BANDY RD
City-State-Zip: ROANOKE VA 24014

Title DIRECTOR
Name EWERT, JESSICA
Address 3240 HYDE PARK RD
City-State-Zip: PENSACOLA FL 32503

Title DIRECTOR
Name WANKELEH, FOSTER
Address 395 CLAIRMONT DR
City-State-Zip: PENSACOLA FL 32506

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: GAVIN W FINLEY**DIRECTOR**

03/12/2021

Electronic Signature of Signing Officer/Director Detail

Date