

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003089

Entity Name: FELLOWSHIP CHURCHES OF SANTA ROSA COUNTY, INC.**Current Principal Place of Business:**5541 ECONFINA STREET
MILTON, FL 32570**Current Mailing Address:**PO BOX 4323
MILTON, FL 32572 US**FEI Number:** 20-4847978**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GILMORE, WARREN
5541 ECONFINA STREET
MILTON, FL 32570 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 PRESIDENT
Name LINDSEY, FITZGERALD
Address PO BOX 4323
City-State-Zip: MILTON FL 32572

Title TREASURER
Name ALEXANDER, VICTOR
Address PO BOX 4323
City-State-Zip: MILTON FL 32572

Title OFFICER
Name HAMILTON, MURRAY
Address PO BOX 4323
City-State-Zip: MILTON FL 32572

Title DEACON
Name FRANKLIN, CLAUDIE
Address PO BOX 4323
City-State-Zip: MILTON FL 32572

Title OFFICER
Name HAMILTON, MURRAY
Address PO BOX 4323
City-State-Zip: MILTON FL 32572

Title DEACON
Name FRANKLIN, CLAUDIE
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Title OFFICER
Name HAMILTON, MURRAY
Address PO BOX 4323
City-State-Zip: MILTON FL 32572

Title DEACON
Name FRANKLIN, CLAUDIE
Address PO BOX 4323
City-State-Zip: MILTON FL 32572

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: CLAUDIE FRANKLIN

DEACON

04/10/2016

Electronic Signature of Signing Officer/Director Detail

Date