

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006040

FILED
Mar 13, 2024
Secretary of State
9975312639CC

Entity Name: EVERGLADES COMMUNITY CHURCH A NONDENOMINATIONAL INC.

Current Principal Place of Business:

101 S COPELAND AVE
EVERGLADES CITY, FL 341390177

Current Mailing Address:

P O BOX 177
EVERGLADES CITY, FL 341390177 US

FEI Number: 22-3934843

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MIDDELSTAEDT, ELAINE
410 STORTER AVE S
BOX 277
EVERGLADES CITY, FL 341390277 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: ELAINE MIDDELSTAEDT

03/13/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR, PRESIDENT
Name BARKER, CECIL
Address 612 COLLIER AVE
BOX 616
City-State-Zip: EVERGLADES CITY FL 341390616

Title DIRECTOR
Name BARKER, CONNIE
Address 612 COLLIER AVE
BOX 616
City-State-Zip: EVERGLADES CITY FL 341390616

Title DIRECTOR
Name LEE, SHARON
Address 49 EAST FLAMINGO DR
BOX 5057
City-State-Zip: EVERGLADES CITY FL 341395057

Title DIRECTOR
Name LEE, SHARON
Address 49 EAST FLAMINGO DR
BOX 5057
City-State-Zip: EVERGLADES CITY FL 341395057

Title TREASURER
Name MIDDELSTAEDT, ELAINE
Address 410 STORTER AVE S
BOX 277
City-State-Zip: EVERGLADES CITY FL 341390277

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: ELAINE MIDDELSTAEDT

TREASURER

03/13/2024

Electronic Signature of Signing Officer/Director Detail

Date