

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010297

Entity Name: GOD'S LOVE OF FAITH ASSEMBLY INC.**Current Principal Place of Business:**9951 ATLANTIC BLVD
402
JACKSONVILLE, FL 32216**Current Mailing Address:**3620 BRIDGEWOOD DRIVE
JACKSONVILLE, FL 32277 US**FEI Number:** 20-5735290**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**WATSON, JARVIS J
4835 HATTERAS ROAD
JACKSONVILLE, FL 32208 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	PO
Name	WATSON, JARVIS J
Address	4835 HATTERAS ROAD
City-State-Zip:	JACKSONVILLE FL 32208

Title	LO
Name	JENKINS, MARVIN O
Address	313 SUMMERSET DRIVE
City-State-Zip:	JACKSONVILLE FL 32259

Title	FO
Name	WILLIAMS-WATSON, DEBORAH A
Address	3620 BRIDGEWOOD DRIVE
City-State-Zip:	JACKSONVILLE FL 32277

Title	CO
Name	WATSON, WILLIAM ESR.
Address	4835 HATTERAS ROAD
City-State-Zip:	JACKSONVILLE FL 32208

Title	BOM
Name	WATSON, CHRISTINE R
Address	4835 HATTERAS ROAD
City-State-Zip:	JACKSONVILLE FL 32208

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: DEBORAH WILLIAMS-WATSON

FO

04/11/2014

Electronic Signature of Signing Officer/Director Detail_____
Date