# DOCUMENT# N07000009613 Entity Name: APOSTOLIC FAITH CHURCH, HOUSE OF THE WORD OF GOD,

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

# **Current Principal Place of Business:**

1195 NW 119 ST MIAMI, FL 33168

INC.

## **Current Mailing Address:**

1195 NW 119 ST MIAMI, FL 33168 US

## FEI Number: 45-0576883

#### Name and Address of Current Registered Agent:

MONTILUS, HELICIE 360 NW 190TH STREET MIAMI GARDENS, FL 33169 US Certificate of Status Desired: Yes

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

# **Officer/Director Detail :**

Officer/Director Detail .				
	Title	PC	Title	D/VP
	Name	BORGELLA, JEAN	Name	PHELICIN, MARIE
	Address	15500 NE 15TH CT.	Address	20410 NE 15TH AVE
	City-State-Zip:	NORTH MIAMI BEACH FL 33162	City-State-Zip:	MIAMI FL 33179
				_
	Title	D/T	Title	D
	Name	NOEL, WILMAN DEACON	Name	PAUL, JOSIER
	Address	332 NE 166TH ST.	Address	1521 NW 182 ST.
	City-State-Zip:	MIAMI FL 33162	City-State-Zip:	MIAMI FL 33169
	Title	D/S	Title	D
	Name	MONTILUS, HELICIE	Name	LAVIOLETTE, DENISE
	Address	360 NW 190TH STREET	Address	17081 NORTH MIAMI AVE
	City-State-Zip:	MIAMI GARDNES FL 33169	City-State-Zip:	MIAMI FL 33162

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.

AGENT

# SIGNATURE: HELICIE MONTILUS

Electronic Signature of Signing Officer/Director Detail

FILED Jan 08, 2023 Secretary of State 0531967189CC

01/08/2023

Date