

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09218

Entity Name: SHEKINAH FAITH CENTER MINISTRIES, INCORPORATED

Current Principal Place of Business:

502 N.W 16TH AVENUE
SUITE # 5&6
GAINESVILLE, FL 32601

Current Mailing Address:

P.O. BOX 5156
GAINESVILLE, FL 32627

FEI Number: 59-2524483

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MCCLELLAN, KENNETH L
502 N.W 16TH AVENUE
SUITE # 5
GAINESVILLE, FL 32601 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 PD, PASTOR
Name MCCLELLAN, KENNETH L
Address 2741 NW 68TH AVENUE
City-State-Zip: GAINESVILLE FL 32653

Title TRUSTEE
Name MCCLELLAN, SUSAN
Address 2741 NW 68TH AVE
City-State-Zip: GAINESVILLE FL 32616

Title SECRETARY
Name MCCLELLAN, SUSAN
Address 2741NW 68 TH AVE
City-State-Zip: GAINESVILLE FL 32653

Title TRUSTEE, DEACON
Name OATES, SAMMIE
Address 3411 NW 49TH AVE
City-State-Zip: GAINESVILLE FL 32605

Title TRUSTEE
Name DARLING, BRENDA
Address 3643 NW 46 PLACE
City-State-Zip: GAINESVILLE FL 32605

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: KENNETH L. MCCLELLAN

PD, PASTOR

02/12/2024

Electronic Signature of Signing Officer/Director Detail

Date