

**2019 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  
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  
Name MCCLELLAN, KENNETH L  
Address 2741 NW 68TH AVENUE  
City-State-Zip: GAINESVILLE FL 32653

Title D  
Name MCKNIGHT, CHARLES L  
Address 526 S.W. 5TH AVE.  
City-State-Zip: GAINESVILLE FL 32601

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 MEMBER  
Name MCCLELLAN, LASHENAKA V  
Address 2828 NE 17TH DR.  
City-State-Zip: GAINESVILLE FL 32609

*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:** KENNETHL. MCCLELLAN

PD

04/29/2019

Electronic Signature of Signing Officer/Director Detail

Date