## 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09737

Entity Name: ST. LUKE CHURCH OF GOD APOSTOLIC FAITH,

**INCORPORATED** 

**Current Principal Place of Business:** 

15246 21ST STREET DADE CITY, FL 33523

**Current Mailing Address:** 

15246 21ST STREET DADE CITY, FL 33523 US

FEI Number: 59-1890818 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SMITH, ETHEL BPDC 14626 8TH STREET DADE CITY, FL 33523 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

FILED Mar 26, 2018

**Secretary of State** 

CC3237006721

Officer/Director Detail:

Title PDC Title VD

NameSMITH, ETHEL BNameMCKNIGHT, ANNIE SDAddress14626 8TH STREETAddress14801 N 11TH STREET

City-State-Zip: DADE CITY FL 33523 City-State-Zip: DADE CITY FL

Title TREASURER, DIRECTOR Title SECRETARY, DIRECTOR

Name HARRIS, ETHEL Name BROWN, SANDRA

Address 14812 12TH STREET Address 37445 ORANGE ROW LANE

City-State-Zip: DADE CITY FL City-State-Zip: DADE CITY FL

Title CHAIRMAN, DIRECTOR Title DIRECTOR

Name SMITH, FRANK, JR. Name PONDER, GLENDA Address 14708 17TH STREET Address 38528 HENRY DR.

City-State-Zip: DADE CITY FL City-State-Zip: ZEPHYRHILLS FL 33542

Title DIRECTOR

Name HARRIS, GRANDVILLE
Address 14812 12TH STREET
City-State-Zip: DADE CITY FL 33523

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: SANDRA A. BROWN

SECRETARY DIRECTOR

03/26/2018