

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000009444

**FILED**  
**Mar 31, 2018**  
**Secretary of State**  
**CC5153673393**

**Entity Name:** FRUIT OF THE VINE FELLOWSHIP CORP

**Current Principal Place of Business:**

151 EAST HALIFAX AVENUE  
OAK HILL, FL 32759

**Current Mailing Address:**

151 EAST HALIFAX AVENUE  
OAK HILL, FL 32759

**FEI Number:** 46-1360824

**Certificate of Status Desired:** No

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

GRIFFITH, LINDA M  
151 EAST HALIFAX AVENUE  
OAK HILL, FL 32759 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            PRES  
Name            GRIFFITH, WILLIAM E III  
Address        151 EAST HALIFAX AVENUE  
City-State-Zip: OAK HILL FL 32759

Title            VP  
Name            GRIFFITH, LINDA MARIE  
Address        151 EAST HALIFAX AVENUE  
City-State-Zip: OAK HILL FL 32759

Title            SECRETARY  
Name            GRIFFITH, LINDA MARIE  
Address        151 EAST HALIFAX AVENUE  
City-State-Zip: OAK HILL FL 32759

*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:** WILLIAM E. GRIFFITH

**PRESIDENT**

**03/31/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date