

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000004256

**Entity Name:** THE LIGHT OF LIFE CHURCH OF FORT WALTON BEACH, FL  
INC.

**Current Principal Place of Business:**

757 MAYFLOWER AVE  
FORT WALTON BEACH, FL 32547

**Current Mailing Address:**

P.O. BOX 125  
FORT WALTON BEACH, FL 32549

**FEI Number: 59-3374978**

**Certificate of Status Desired: No**

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

NELSON, RONALD L  
206 CALIFORNIA DRIVE NE  
FORT WALTON BEACH, FL 32548 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 CHOB  
Name NELSON, RONALD L  
Address 206 CALIFORNIA DRIVE NE  
City-State-Zip: FORT WALTON BEACH FL 32548

Title M  
Name ALEXANDER, SHONTA  
Address 87 COUNTRY CLUB ROAD  
City-State-Zip: SHALIMAR FL 32579

Title S  
Name ROSE, ROBIN Y  
Address 38 CARLTON COURT NW  
City-State-Zip: FORT WALTON BEACH FL 32548

Title VCH  
Name NELSON, CATHERINE S  
Address 206 CALIFORNIA DRIVE NE  
City-State-Zip: FORT WALTON BEACH FL 32548

Title M  
Name QUAKER, CONECIA  
Address 9806 PARKER LANE CIRCLE  
City-State-Zip: NAVARRE FL 32566

Title T  
Name MACK, GLORIA  
Address 2165 ROSEWOOD DRIVE  
City-State-Zip: NAVARRE FL 32566

*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: CATHERINE NELSON**

**ASSOCIATE MINISTER**

**01/25/2017**

Electronic Signature of Signing Officer/Director Detail

Date