

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000004489

**Entity Name:** THE WHOLE ARMOUR OF GOD WORSHIP CENTER, INC.**Current Principal Place of Business:**3529 SAINT JOHN STREET  
PANAMA CITY, FL 32401-5747**Current Mailing Address:**1307 KENTUCKY AVE  
LYNN HAVEN, FL 32444-2250 US**FEI Number:** 59-3688803**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**MORNING, BEN NONE III  
1307 KENTUCKY AVE  
LYNN HAVEN, FL 32444-2250 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:** BEN MORNINGIII

04/05/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PASTOR  
Name MORNING, BEN NONE III  
Address 1307 KENTUCKY AVE  
City-State-Zip: LYNN HAVEN FL 32444-2250

Title ASST. PASTOR, ELDER  
Name MORNING, TERRY LAMOR  
Address 165 NORTH KIMBREL AVE  
City-State-Zip: CALLAWAY FL 32404

Title PRESIDENT  
Name MORNING, DORIS ETHELDA  
Address 1307 KENTUCY AVE  
City-State-Zip: LYNN HAVEN FL 32444-2250

Title DEACONESS, SECRETARY,  
TREASURER  
Name RUSS, TRESSIE DARLENE  
Address 6720 PRIDGEN STREET  
City-State-Zip: CALLAWAY FL 32404

Title ASST. SECRETARY / ASST.  
TREASURE / TRUSTEE  
Name BUSH, COLBI  
Address 1307 KENTUCKY AVE  
City-State-Zip: LYNN HAVEN FL 32444-2250

Title CO-TRUSTEE, DEACON  
Name MORNING, PAUL LAMAR  
Address 1307 KENTUCKY AVE  
City-State-Zip: LYNN HAVEN FL 32444-2250

*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:** BEN MORNING III

PASTOR

04/05/2021

Electronic Signature of Signing Officer/Director Detail

Date