

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14000000630

**Entity Name:** RED HILLS CHURCH, INC.**Current Principal Place of Business:**1400 VILLAGE SQUARE BLVD., SUITE 3-7  
TALLAHASSEE, FL 32312**Current Mailing Address:**1400 VILLAGE SQUARE BLVD., SUITE 3-7  
TALLAHASSEE, FL 32312**FEI Number:** 46-4612809**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WILSON, CHAD W  
1025 TRACEY ANN LOOP  
SEFFNER, FL 33584 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	OCHS, MARSHALL B
Address	1400 VILLAGE SQUARE BLVD., SUITE 3-7
City-State-Zip:	TALLAHASSEE FL 32312

Title	SD
Name	WILSON, JENNIFER C
Address	1400 VILLAGE SQUARE BLVD., SUITE 3-7
City-State-Zip:	TALLAHASSEE FL 32312

Title	TD
Name	WILSON, CHAD W
Address	1400 VILLAGE SQUARE BLVD., SUITE 3-7
City-State-Zip:	TALLAHASSEE FL 32312

Title	D
Name	SCOTT, PRESTON
Address	1400 VILLAGE SQUARE BLVD., SUITE 3-7
City-State-Zip:	TALLAHASSEE FL 32312

Title	D
Name	SCOTT, CYNTHIA
Address	1400 VILLAGE SQUARE BLVD., SUITE 3-7
City-State-Zip:	TALLAHASSEE FL 32312

*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: CHAD WILSON****TREASURER****06/19/2020**

Electronic Signature of Signing Officer/Director Detail

Date