

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14340

FILED
Jan 30, 2017
Secretary of State
CC0110675702

Entity Name: PENTECOSTAL MIRACLE REVIVAL CENTER INC.

Current Principal Place of Business:

C/O WILLIAM & ALNESH A HOLMES
217 SOUTH LAKE AVE
PAHOKEE, FL 33476

Current Mailing Address:

301 NORTH WEST 11TH STREET
BELLE GLADE, FL 33430

FEI Number: 65-0337845

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

HOLMES, WILLIAM JR
301 NORTH WEST 11TH STREET
BELLE GLADE, FL 33430 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 P
Name HOLMES, WILLIAM JR
Address 301 NORTH WEST 11TH STREET
City-State-Zip: BELLE GLADE FL 33430

Title VP
Name JOHNSON, HATTIE M
Address 3854 3RD NORTH 86 ST APT: 38
City-State-Zip: PAHOKEE FL 33476

Title BM
Name EVANS, SADIE L
Address 371 SALVATORE COURT
City-State-Zip: PAHOKEE FL 33476

Title BM
Name HARDNETT, WILLIE
Address 1749 E MAIN ST APT 111
City-State-Zip: PAHOKEE FL 33476

Title SEC
Name STONE, LULA M
Address 369 J-MALONE DRIVE
City-State-Zip: PAHOKEE FL 33476

Title BM
Name SANDY, COX D
Address 825 N.E. 25TH STREET
City-State-Zip: BELLE GLADE FL 33430

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 HOLMES JR

PRESIDENT

01/30/2017

Electronic Signature of Signing Officer/Director Detail

Date