2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2025
Secretary of State
1684854078CC

DOCUMENT# N16000009309

Entity Name: SOMOS CHURCH, INC.

Current Principal Place of Business:

3125 U.S. HIGHWAY 98 SOUTH
LAKELAND, FL 33803

Current Mailing Address:

POST OFFICE BOX 7081
LAKELAND, FL 33807 US

FEI Number: 81-3924261

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LINDSEY, COY
2611 JONILA AVE.
LAKELAND, FL 33803 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	PRESIDENT, PASTOR
Name	LINDSEY, COY
Address	2611 JONILA AVE.
City-State-Zip:	LAKELAND FL 33803

Title	D
Name	MILLER, JIM
Address	1117 DENTON STREET
City-State-Zip:	LAKELAND FL 33803

Title	D
Name	MILLER, JAMES J
Address	3077 SHOAL CREEK VILLAGE
City-State-Zip:	LAKELAND FL 33803

Title	DIRECTOR
Name	DEL VALLE, GREGORY
Address	921 WINNIE LANE
City-State-Zip:	LAKELAND FL 33813

Title	TREASURER
Name	BALLINGER, SHIRLEY
Address	757 PENINSULAR DRIVE
City-State-Zip:	LAKELAND FL 33813

Title	D
Name	HATCHER, JARED
Address	5630 SPRING LAKE DR
City-State-Zip:	LAKELAND FL 33811

Title	D, SECRETARY
Name	ORR, NICOLE
Address	215 W PALM DRIVE
City-State-Zip:	LAKELAND FL 33803

Title	DIRECTOR
Name	WILSON, KAYLA
Address	160 MELISSA TRAIL
City-State-Zip:	AUBURNDALE FL 33823

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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: SHIRLEY BALLINGER TREASURER 04/18/2025

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	ALBRITTON, KEIARA
Address	818 WOODWARD STREET
City-State-Zip:	LAKELAND FL 33803