

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

DOCUMENT# N17000004388

**Entity Name:** CHURCH OF GOD BY FAITH FINANCIAL SOLUTIONS, INC.

**Current Principal Place of Business:**

2409 OLD MIDDLEBURG RD., NORTH  
JACKSONVILLE, FL 32210

**Current Mailing Address:**

2409 OLD MIDDLEBURG RD., NORTH  
JACKSONVILLE, FL 32210

**FEI Number: 82-1307967**

**Certificate of Status Desired: Yes**

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 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 D/P  
Name MCKNIGHT, JAMES E JR.  
Address 2409 OLD MIDDLEBURG RD., NORTH  
City-State-Zip: JACKSONVILLE FL 32210

Title D/T  
Name TURNER, HORACE N SR.  
Address 2409 OLD MIDDLEBURG RD., NORTH  
City-State-Zip: JACKSONVILLE FL 32210

Title D, S  
Name WILLIAMS, JAMES E  
Address 2409 OLD MIDDLEBURG RD., NORTH  
City-State-Zip: JACKSONVILLE FL 32210

Title D/VP  
Name WARE, JAMES T  
Address 2409 OLD MIDDLEBURG RD., NORTH  
City-State-Zip: JACKSONVILLE FL 32210

Title D/VP  
Name DAYMON, REGINALD L SR.  
Address 2409 OLD MIDDLEBURG RD., NORTH  
City-State-Zip: JACKSONVILLE FL 32210

*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: JAMES E. MCKNIGHT JR.**

**PRESIDENT**

**02/03/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date