2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17000004580

Entity Name: SOWERS4PASTORS, INC.

Current Principal Place of Business:

2609 SOUTH SANFORD AVE SANFORD. FL 32773

Current Mailing Address:

2609 SOUTH SANFORD AVE SANFORD, FL 32773 US

FEI Number: 82-1025136 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BOROWSKI, DAVID J SR. 2609 SOUTH SANFORD AVE SANFORD, FL 32773 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

FILED May 18, 2019

Secretary of State

0888872431CC

Officer/Director Detail:

Title DP Title DS

Name SOWERS, ALLEN L Name COFER, JAMES M

Address 2609 SOUTH SANFORD AVE Address 2609 SOUTH SANFORD AVE

City-State-Zip: SANFORD FL 32773 City-State-Zip: SANFORD FL 32773

Title DT Title D

Name WILLIAMS, JANIS B Name SOWERS, RUSSELL L

Address 2609 SOUTH SANFORD AVE Address 2609 SOUTH SANFORD AVE

City-State-Zip: SANFORD FL 32773 City-State-Zip: SANFORD FL 32773

Title D Title D

Name HALL, KIMBERLY M Name BOROWSKI, DAVID J

Address 2609 SOUTH SANFORD AVE Address 2609 SOUTH SANFORD AVE

City-State-Zip: SANFORD FL 32773 City-State-Zip: SANFORD FL 32773

Title DIRECTOR Title DIRECTOR

NameDREESSEN, JOHNNameWEBSTER, TIMOTHYAddress2579 DANIELLE DRAddress4903 WIGVILLE RD.City-State-Zip:OVIEDO FL 32765City-State-Zip:THURMONT MD 21788

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: ALLEN SOWERS PRESIDENT 05/18/2019