

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17000008210

Entity Name: HALLELUJAH COMMUNITY CHURCH, INC.**Current Principal Place of Business:**1944 SUWANEE AVE
FORT MYERS, FL 33901**Current Mailing Address:**226 SE 15TH ST
CAPE CORAL, FL 33990 US**FEI Number: 82-2635549****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**JACQUET-CASTOR, BEATRICE
226 SE 15TH ST
CAPE CORAL, FL 33990 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: BEATRICE JACQUET-CASTOR****04/30/2019**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PASTOR
Name CASTOR, EUNIQUE
Address 226 SE 15TH ST
City-State-Zip: CAPE CORAL FL 33990

Title D
Name CASTOR, PRINCE PREMIS
Address 226 SE 15TH ST
City-State-Zip: CAPE CORAL FL 33990

Title D
Name BUTTS, TIMOTHY
Address 3069 NW 4TH AVE
City-State-Zip: CAPE CORAL FL 33993

Title D
Name BERNAVIL, WENDEL
Address 9746 GLADIOLUS BULD LOOP
City-State-Zip: FORT MYERS FL 33908

Title D
Name JOHNSON, GREGORY L
Address 3010 SW 8TH PL
City-State-Zip: CAPE CORAL FL 33914

Title D
Name EMILE , NICLES
Address 7056 BABCOCK RD
City-State-Zip: FORT MYERS FL 33967

Title DIRECTOR
Name LAGUERRE, NANCY
Address 1944 SUWANEE AVE
City-State-Zip: FORT MYERS FL 33901

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: EUNIQUE CASTOR**PASTOR****04/30/2019**

Electronic Signature of Signing Officer/Director Detail

Date