

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18000006810

Entity Name: GREATER LIGHT MINISTRIES WORSHIP CENTER, INC.**Current Principal Place of Business:**580 NW LINCOLN AVENUE
PORT SAINT LUCIE, FL 34983**Current Mailing Address:**P. O. BOX 8404
DELRAY BEACH, FL 33482 US**FEI Number: 83-0986816****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**ADDERLY, LARRY B
580 NW LINCOLN AVENUE
PORT SAINT LUCIE, FL 34983 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 ADDERLY, LARRY
Address 580 NW LINCOLN AVENUE
City-State-Zip: PORT SAINT LUCIE FL 34983

Title DIR, CFO
Name GUY, ANTHONY
Address 706 SW 2ND ST
City-State-Zip: DELRAY BEACH FL 33444

Title TREA
Name HOUSTON-HARMON, EVETTE
Address 646 SW 5TH AVENUE
City-State-Zip: DELRAY BEACH FL 33444

Title ASST. SECRETARY
Name MOSES, TARA L
Address 7141 PIGEON KEY WAY
City-State-Zip: LAKE WORTH FL 33467

Title VP
Name ADDERLY, BEVERLY Q
Address 580 NW LINCOLN AVENUE
City-State-Zip: PORT SAINT LUCIE FL 34983

Title SECT
Name THOMAS, DANA
Address 320 NW 6TH AVENUE
City-State-Zip: DELRAY BEACH FL 33444

Title ASST. TREASURER
Name CLAY, VERTIS J
Address 417 SW 8TH AVE
City-State-Zip: DELRAY BEACH FL 33444

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: LARRY B ADDERLY**PRESIDENT****01/20/2021**

Electronic Signature of Signing Officer/Director Detail

Date