

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18000012909

Entity Name: NEW DAY MERCIES HOUSE OF FAITH INC.**Current Principal Place of Business:**2112 WINGER AVENUE
HAINES CITY, FL 33844**Current Mailing Address:**2112 WINGER AVENUE
HAINES CITY, FL 33844**FEI Number:** 83-2899328**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**HENDERSON, THERESA M
2112 WINGER AVENUE
HAINES CITY, FL 33844 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	PD
Name	HENDERSON, THERESA M
Address	2112 WINGER AVENUE
City-State-Zip:	HAINES CITY FL 33844

Title	VPD
Name	DANIELS, ZORA H
Address	132 WHITEHALL ST
City-State-Zip:	DAVENPORT FL 33844

Title	D
Name	DANIELS, CHARLES
Address	132 WHITEHALL STREET
City-State-Zip:	HAINES CITY FL 33844

Title	DS
Name	ALEXANDER, TEELA
Address	1227 AVENUE M
City-State-Zip:	HAINES CITY FL 33844

Title	D
Name	O'BRYANT, NIKITA
Address	132 WHITEHALL ST
City-State-Zip:	DAVENPORT FL 33844

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: THERESA M HENDERSON

PD

04/29/2022

Electronic Signature of Signing Officer/Director Detail_____
Date