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: RACHEL GUNTER SHAPARD

Electronic Signature of Signing Officer/Director Detail

SIGNATURE: Electronic Signature of Registered Agent

Officer/Director Detail :

Title	DP	Title	DT
Name	GOLDEN, JAMES T	Name	LIEBERMAN, JOYCE
Address	PO BOX 488	Address	PO BOX 488
City-State-Zip:	BRADENTON FL 34206	City-State-Zip:	BRADENTON FL 34206
Title	DS		
Title Name	DS SHAPARD, RACHEL G		
Name	SHAPARD, RACHEL G		

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.

Name and Address of Current Registered Agent:

GOLDEN, JAMES T 4815 11TH AVE CIR E BRADENTON, FL 34208 US

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DOCUMENT# N1900004117

Entity Name: PASTORS FOR FLORIDA CHILDREN, INC.

Current Principal Place of Business:

4654 E STATE ROAD 64 SUITE 231 BRADENTON, FL 34208

Current Mailing Address:

PO BOX 488 BRADENTON, FL 34206 US

FEI Number: 84-3350906

FILED Apr 28, 2020 Secretary of State 4249893138CC

DIRECTOR SECRETARY

Date

04/28/2020

Date

Certificate of Status Desired: No