

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25650

Entity Name: THE CHURCH OF OUR LORD AND SAVIOUR JESUS CHRIST, INC.**FILED**
Jun 04, 2019
Secretary of State
1320556268CC**Current Principal Place of Business:**8442 NEW KINGS ROAD
JACKSONVILLE, FL 32219**Current Mailing Address:**8442 NEW KINGS ROAD
JACKSONVILLE, FL 32219**FEI Number: 59-3015797****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**ROGERS, DOWLING
3947 VICTORIA LANDING DR N
JACKSONVILLE, FL 32208 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	GIBSON, JOHN ACE SR.
Address	12015 MISSION CREEK LN.
City-State-Zip:	JACKSONVILLE FL 32218

Title	VD
Name	ROGERS DOWLING
Address	3947 VICTORIA LANDIND DR NORTH
City-State-Zip:	JACKSONVILLE FL

Title	SD
Name	BOWERS, ROSE
Address	4515 S. LINCREST DRIVE
City-State-Zip:	JACKSONVILLE FL

Title	TD
Name	GIBSON, BARBARA J.
Address	12015 MISSION CREEK LN.
City-State-Zip:	JACKSONVILLE FL 32218

Title	ASST. TREASURER
Name	BUSSIE, MELONEA K
Address	10215 HEMLOCK WAY
City-State-Zip:	JONESBORO GA 30238

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: BARBARA GIBSON**TD****06/04/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date