

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28221

Entity Name: THE POTTER'S HOUSE CHRISTIAN FELLOWSHIP, INC.**Current Principal Place of Business:**5119 NORMANDY BLVD
JACKSONVILLE, FL 32205**Current Mailing Address:**5119 NORMANDY BLVD
JACKSONVILLE, FL 32205 US**FEI Number:** 59-2912536**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MCLAUGHLIN, VAUGHN M
1015 VICTORY LAKE DRIVE
JACKSONVILLE, FL 32221 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, PRESIDENT, CEO
Name MCLAUGHLIN, VAUGHN M
Address 1015 VICTORY LAKE DR.
City-State-Zip: JACKSONVILLE FL 32221

Title VP, COO
Name MCLAUGHLIN, NARLENE
Address 1015 VICTORY LAKE DR.
City-State-Zip: JACKSONVILLE FL 32221

Title VP
Name SHIDER, RONALD SR.
Address 1044 BLUE HILL DR N
City-State-Zip: JACKSONVILLE FL 32209

Title VP
Name MCLAUGHLIN, ANGEL NARLENE
Address 8451 ROCKRIDGE COURT
City-State-Zip: JACKSONVILLE FL 32244

Title TREASURER
Name WILLIAMS, TRAVIS
Address 10640 GRAYSON COURT
City-State-Zip: JACKSONVILLE FL 32220

Title SECRETARY
Name SLATER, BELINDA FAYE
Address 1945 OLD MOSS LANE
City-State-Zip: ORANGE PARK FL 32073

Title VP
Name DEWBERRY, MARK SR.
Address 7804 LAVIN ROAD
City-State-Zip: JACKSONVILLE FL 32221

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: NARLENE MCLAUGHLIN

VP

04/17/2019

Electronic Signature of Signing Officer/Director Detail_____
Date