

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30240

Entity Name: FLORIDA DISTRICT UNITED PENTECOSTAL CHURCH, INC.**Current Principal Place of Business:**5011 NW GAINESVILLE ROAD
OCALA, FL 34475**Current Mailing Address:**5011 NW GAINESVILLE ROAD
OCALA, FL 34475 US**FEI Number:** 59-2798973**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**WELLS, R. LARRY ADMIN.
5011 N. W. GAINESVILLE ROAD
OCALA, FL 34475 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:** R. LARRY WELLS

01/22/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	DT
Name	WILLIAMS, C. PATTON SUPT
Address	4565 SE 48TH PLACE ROAD
City-State-Zip:	OCALA FL 34480

Title	DT
Name	WELCH, PAUL HBRD MEM
Address	6567 LAKE CHARLENE DR.
City-State-Zip:	PENSACOLA FL 32506

Title	DT
Name	CRABTREE, ALLEN EBRD MEM
Address	515 PARKWOOD DR
City-State-Zip:	PANAMA CITY FL 32405

Title	DT
Name	WILLIAMS, MICHAEL JBRD MEM
Address	1566 ISLAY COURT
City-State-Zip:	APOPKA FL 32712

Title	DT
Name	WOLFE, JAMES BRD MEM
Address	10926 FLINT ESTATES DRIVE
City-State-Zip:	THONOTOSASSA FL 33592

Title	ADMINISTRATOR
Name	WELLS, R. LARRY ADMIN.
Address	5011 NW GAINESVILLE ROAD
City-State-Zip:	OCALA FL 34475

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: R. LARRY WELLS**ADMINISTRATOR**

01/22/2014

Electronic Signature of Signing Officer/Director Detail

Date