## 2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30240

Entity Name: FLORIDA DISTRICT UNITED PENTECOSTAL CHURCH, INC.

**FILED** Mar 12, 2025 **Secretary of State** 5112428649CC

## **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:

ROGERS, JUSTIN EARL 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: JUSTIN ROGERS 03/12/2025

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title Title DT

WILLIAMS, CRANFORD PATTON Name WILLIAMS, MICHAEL JBRD MEM Name

4565 SE 48TH PLACE ROAD Address 1566 ISLAY COURT Address

City-State-Zip: APOPKA FL 32712 OCALA FL 34480 City-State-Zip:

Title SUPERINTENDENT Title **ADMINISTRATOR** 

ROGERS, JUSTIN EARL ADMIN. Name BOYD, STEVE A Name

Address 621 SE CEPHAS LISTON ROAD Address 5011 NW GAINESVILLE ROAD BRANFORD FL 32008-5196 City-State-Zip: OCALA FL 34475 City-State-Zip:

Title

Address

**DIRECTOR** THOMPSON, CHARLES CODY Name

2016 WEDGE CT

GREEN COVE SPRINGS FL 32043-City-State-Zip:

8080

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.

03/12/2025 SIGNATURE: JUSTIN ROGERS **ADMINISTRATOR**