

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30371

Entity Name: SALVATION HOLINESS CHURCH INC.

Current Principal Place of Business:

212 N.E. JEM STREET
LAKE CITY, FL 32055

Current Mailing Address:

P.O. BOX 2074
LAKE CITY, FL 32056

FEI Number: 36-3615331

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TROUPE, SR, CLARENCE KPASTOR
244 N.E. MILTON TERRACE
LAKE CITY, FL 32055 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 PRESIDENT
Name TROUPE, CLARENCE K SR.
Address 244 N.E. MILTON TERRACE
City-State-Zip: LAKE CITY FL 32055

Title VP
Name TROUPE, LEATHA
Address 244 N.E. MILTON TERRACE
City-State-Zip: LAKE CITY FL 32055

Title TREASURER
Name HENDON, LAKESIA L
Address 3847 NW FALLING CREEK RD
City-State-Zip: LAKE CITY FL 32055

Title ASST. TREASURER
Name TIMMONS, PINKY I
Address 834 SW JONES TER
City-State-Zip: LAKE CITY FL 32025

Title PASTOR
Name STOCKTON, JANICE
Address 2750 US HIGHWAY 90
City-State-Zip: LAKE CITY FL 32055

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: LAKESIA L HENDON

TREASURER

04/18/2024

Electronic Signature of Signing Officer/Director Detail

Date