

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N94000005515

**Entity Name:** CENTER FOR SPIRITUAL LIVING FLORIDA GULFCOAST, INC**Current Principal Place of Business:**6152 126TH AVENUE  
# 501  
LARGO, FL 33773**Current Mailing Address:**6152 126TH AVENUE  
# 501  
LARGO, FL 33773 US**FEI Number:** 59-3294689**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WALL, HELEN M  
6066 113 AVENUE NO  
PINELLAS PARK, FL 33782 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:** HELEN M WALL

03/26/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name MARSH, TOMMY  
Address 8961-ANTIGUA DR.  
City-State-Zip: LARGO FL 33777

Title PRESIDENT  
Name WALL, HELEN M MS  
Address 6066 113TH AVENUE  
City-State-Zip: PINELLAS PARK FL 33782

Title PASTOR  
Name PRESTON, MARTIN  
Address 6152 126TH AVENUE  
# 501  
City-State-Zip: LARGO FL 33773

Title TREASURER  
Name WHITE, CONNIE MS  
Address 34635 CAMPHOR DR. N  
City-State-Zip: PINELLAS PARK FL 33781

Title SECRETARY  
Name ROBERTS , NORMA MS  
Address 2005 12 AVENUE SO  
City-State-Zip: ST PETERSBURG FL 33712

Title TRUSTEE  
Name MILLER, CINDY  
Address 17317 SOLIE RD,  
City-State-Zip: ODESSA FL 33556

Title TRUSTEE  
Name GREENE. , LESLIE  
Address 545 39 ST SO  
City-State-Zip: ST. PETERSBURG FL 33711

Title TRUSTEE  
Name WIZOREK, JERRY  
Address 1315 NURSERY RD  
City-State-Zip: CLEARWATER FL 33756

**Continues on page 2**

*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:** HELEN M. WALL

PRESIDENT

03/26/2020

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title	TRUSTEE
Name	WHITE, WILLIAM
Address	34635 CAMPHOR DR. N
City-State-Zip:	PINELLAS PARK FL 33781