#### 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005643

Entity Name: HEBRON EVANGELICAL FELLOWSHIP MINISTRIES, INC.

**FILED** Feb 18, 2024 **Secretary of State** 8175228455CC

# **Current Principal Place of Business:**

2675 SW 177 PL RD OCALA, FL 34473

# **Current Mailing Address:**

2675 SW 177 PL RD OCALA, FL 34473 US

FEI Number: 59-3349150 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

PARRIS, GEORGE C 2675 SOUTH WEST 177TH PLACE ROAD OCALA, FL 34473 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:

Title

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title Title

PARRIS, GEORGE C MUIR, KATHLEEN Name Name 8494 SW 136 LOOP Address 2675 SW 177TH PL RD. Address City-State-Zip: OCALA FL 34473 OCALA FL 34473 City-State-Zip:

Title **ADMINISTRATORDIRECTOR** Title DT

Name PARRIS, JOAN Name CLARKE, SHERRION

Address 2675 SW 177 PLACE RD. Address 5220 SW 115 LOOP

OCALA FL 34473 City-State-Zip: OCALA FL 34476 City-State-Zip:

Title D Title **PASTOR** 

Name SCOTT, MARTIN Name CHARLES, TERRENCE SR. Address 102 ROCKAWAY AVE 17411 SW 27 CIR Address BROOKLYN NY 11233 City-State-Zip: City-State-Zip: OCALA FL 34473

Title

PHILIP, LYDIA Name BRADSHAW, EVELYN Name

312 SCHENECTADY AVE APT B7 Address Address 35 E 92 ST

City-State-Zip: **BROOKLYN NY 11213 BROOKLYN NY 11233** City-State-Zip:

#### 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: TERRENCE CHARLES **PASTOR** 

Electronic Signature of Signing Officer/Director Detail

02/18/2024 Date

# Officer/Director Detail Continued:

Title SECRETARY
Name PHILIPS, JUDITH
Address 3027 SW 132ND ST
City-State-Zip: OCALA FL 34473