### 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002840

Entity Name: RESTORATION FELLOWSHIP CENTER, INC.

FILED Feb 23, 2017 Secretary of State CC1362893476

# **Current Principal Place of Business:**

3500 W OAKLAND PARK BLVD. LAUDERDALE LAKES, FL 33319

## **Current Mailing Address:**

5550 NW 44 ST. APT 313B LAUDERHILL, FL 33319

FEI Number: 65-0754022 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

APT. 313B FL 33319

HYLTON, WORRELL R 5550 NW 44 ST. APT. 313B LAUDERHILL, FL 33319 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.

City-State-Zip:

APT. 313B FL 33319

SIGNATURE:

City-State-Zip:

Electronic Signature of Registered Agent

Date

### Officer/Director Detail:

Title P Title V

NameHYLTON, WORRELLNameHYLTON, ZENAAddress5550 NW 44 ST.Address5550 NW 44 ST.

Title ST Title D

Name WHITTAKER, WILDER Name SARA, HENRIQUES
Address 1441 N.W. 47TH AVE. Address 1441 N.W. 47TH AVE.

City-State-Zip: COCONUT CREEK FL 33063 City-State-Zip: COCONUT CREEK FL 33043

Title P Title V

Name HYLTON, WORRELL R SR. Name HTLTON, ZENA

 Address
 5550 NW 44 ST. APT. 313B
 Address
 5550 NW 44 ST. APT 313B

 City-State-Zip:
 LAUDERHILL FL 33319
 City-State-Zip:
 LAUDERHILL FL 33319

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: WORRELL HYLTON

**PRESIDENT** 

02/23/2017