

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N96000006081

**FILED**  
**Apr 04, 2016**  
**Secretary of State**  
**CC9259970358**

**Entity Name:** JESUS PEOPLE FAMILY WORSHIP CENTER CHURCH, INC.

**Current Principal Place of Business:**

9340 NORTH FLORIDA AVENUE  
SUITE I  
TAMPA, FL 33612

**Current Mailing Address:**

9340 NORTH FLORIDA AVENUE  
SUITE I  
TAMPA, FL 33612 US

**FEI Number:** 65-0713778

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

MITCHELL, ANDRE V  
9340 NORTH FLORIDA AVENUE  
SUITE I  
TAMPA, FL 33612 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 PD  
Name MITCHELL, ANDRE' V  
Address 9340 NORTH FLORIDA AVENUE,  
SUITE I  
City-State-Zip: TAMPA FL 33612

Title T  
Name ROBINSON, YVONNE  
Address 9340 NORTH FLORIDA AVENUE,  
SUITE I  
City-State-Zip: TAMPA FL 33612

Title T  
Name CALLAWAY, AUDRA  
Address 9340 NORTH FLORIDA AVENUE,  
SUITE I  
City-State-Zip: TAMPA FL 33612

Title T  
Name HOWARD, MILDRED  
Address 9340 NORTH FLORIDA AVENUE  
SUITE I  
City-State-Zip: TAMPA FL 33612

Title T  
Name GORDON, FEDERICO  
Address 9340 NORTH FLORIDA AVENUE,  
SUITE I  
City-State-Zip: TAMPA FL 33612

Title TRUSTEE  
Name MITCHELL, NANCY M  
Address 9340 NORTH FLORIDA AVENUE  
SUITE I  
City-State-Zip: TAMPA FL 33612

Title TRUSTEE  
Name POPE, CORLUS  
Address 9340 NORTH FLORIDA AVENUE  
SUITE I  
City-State-Zip: TAMPA FL 33612

*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:** MITCHELL, ANDRE', V.

PD

04/04/2016

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date