

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N96000006081

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

**FILED**  
**Apr 25, 2023**  
**Secretary of State**  
**4396353044CC**

**Current Principal Place of Business:**

4750 NORTH DALE MABRY HIGHWAY  
TAMPA, FL 33614

**Current Mailing Address:**

13014 NORTH DALE MABRY HIGHWAY  
#116  
TAMPA, FL 33618 US

**FEI Number:** 65-0713778

**Certificate of Status Desired:** Yes

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

MITCHELL, ANDRE V  
4750 NORTH DALE MABRY HIGHWAY  
TAMPA, FL 33614 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 4750 NORTH DALE MABRY HIGHWAY  
City-State-Zip: TAMPA FL 33614

Title T  
Name MOISE, WECLAIGE  
Address 4750 NORTH DALE MABRY HIGHWAY  
City-State-Zip: TAMPA FL 33614

Title T  
Name CALLAWAY, AUDRA  
Address 4750 NORTH DALE MABRY HIGHWAY  
City-State-Zip: TAMPA FL 33614

Title T  
Name MENCHION, HOWARD  
Address 4750 NORTH DALE MABRY HIGHWAY  
City-State-Zip: TAMPA FL 33614

Title T  
Name GORDON, FEDERICO  
Address 4750 NORTH DALE MABRY  
City-State-Zip: TAMPA FL 33614

Title TRUSTEE  
Name MITCHELL, NANCY M  
Address 4750 NORTH DALE MABRY HIGHWAY  
City-State-Zip: TAMPA FL 33614

Title TRUSTEE  
Name SINORDO, ALVIN  
Address 4750 NORTH DALE MABRY HIGHWAY  
City-State-Zip: TAMPA FL 33614

*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

04/25/2023

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

\_\_\_\_\_  
Date