

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000006579

Entity Name: MARION OAKS ASSEMBLY OF GOD, INC.**Current Principal Place of Business:**13977 SW 32ND TERRACE ROAD
OCALA, FL 34473**Current Mailing Address:**13977 SW 32ND TERRACE ROAD
OCALA, FL 34473**FEI Number:** 59-2929293**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MCINTYRE, TIMOTHY MREV
13977 SW 32ND TERRACE 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PASTOR
Name	MCINTYRE, TIMOTHY
Address	13977 SW 32 TER RD
City-State-Zip:	OCALA FL 34473

Title	ELDER
Name	FRENCH, EGBERT
Address	15169 SW 48TH AVE.
City-State-Zip:	OCALA FL 34473

Title	ELDER
Name	MCGHIE, ALVIN
Address	14371 SW 33 COURT ROAD
City-State-Zip:	OCALA FL 34473

Title	SECRETARY / ELDER
Name	SPENCE, JOHN
Address	15620 SW 46 CIRCLE
City-State-Zip:	OCALA FL 34473

Title	TREASURER
Name	ANABEL, CARDINEZ
Address	13977 SW 32ND TERRACE ROAD
City-State-Zip:	OCALA FL 34473

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: TIMOTHY MCINTYRE

PASTOR

01/16/2018

Electronic Signature of Signing Officer/Director Detail_____
Date