

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N97000003303

**FILED**  
**Jan 02, 2018**  
**Secretary of State**  
**CC7059016049**

**Entity Name:** GOD'S HEALING HOLINESS CHRISTIAN CHURCH, INC.

**Current Principal Place of Business:**

1690 MARIE STREET  
MALABAR, FL 32950

**Current Mailing Address:**

P.O. BOX 501049  
MALABAR, FL 32950 US

**FEI Number: 59-3459115**

**Certificate of Status Desired: No**

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

BORLAND, PAULINE REV  
1690 MARIE STREET  
MALABAR, FL 32950 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	Title	SECRETARY
Name	BORLAND, PAULINE	Name	HERBERT, BRENDA
Address	1690 MARIE STREET	Address	1690 MARIE STREET
City-State-Zip:	MALABAR FL 32950	City-State-Zip:	MALABAR FL 32950

Title           TREASURER  
Name           MOHAMMED, ELIZABETH  
Address        1690 MARIE STREET  
City-State-Zip: MALABAR FL 32950

*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: BISHOP PAULINE BORLAND**

**SENIOR PASTOR**

**01/02/2018**

Electronic Signature of Signing Officer/Director Detail

Date