# 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: DELBRA M JOHNSON

Electronic Signature of Signing Officer/Director Detail

# **Current Mailing Address:**

PO BOX 1593 QUINCY, FL 32352 US

## FEI Number: 05-0025100

### Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

JOHNSON, MADISON 1043 HUTCHINSON FERRY RD. QUINCY, FL 32352 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:

Officer/Director Detail :			
Title	PRESIDENT	Title	VP
Name	JOHNSON, DELBRA M	Name	JOHNSON, MADISON SR
Address	1043 HUTCHINSON FERRY ROAD	Address	1043 HUTCHINSON FERRY ROAD
City-State-Zip:	QUINCY FL 32352	City-State-Zip:	QUINCY FL 32352

# Certificate of Status Desired: No

03/15/2024

FILED Mar 15, 2024 Secretary of State 9519264703CC

# 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

# DOCUMENT# 730320

Entity Name: FAITH TEMPLE OF JESUS CHRIST, INC.

# **Current Principal Place of Business:**

609 CAMILLA AVE. QUINCY, FL 32352

Date

PRESIDENT

Date