

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

DOCUMENT# 769345

**Entity Name:** WORLD'S CHURCH OF THE LIVING GOD OF POMPANO BEACH, FLORIDA INC.

**FILED**  
**Apr 12, 2016**  
**Secretary of State**  
**CC1744026191**

**Current Principal Place of Business:**

4001 D VIRGINIA AVE.  
FORT PIERCE, FL 34981

**Current Mailing Address:**

P.O. BOX 7674  
PORT ST. LUCIE, FL 34985 US

**FEI Number: 59-2309279**

**Certificate of Status Desired: Yes**

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

ROLLINS, FRANK  
1291 SW WELLINGTON AVE  
PORT SAINT LUCIE, FL 34953 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 SD  
Name BENJAMIN, QUEEN  
Address 213 NW BAYSHORE BLVD  
City-State-Zip: PORT ST LUCIE FL 34983

Title T  
Name MILLER, ANNIE JOYCE  
Address 2110 LINDA SUE CIRCLE  
APT. 107  
City-State-Zip: FORT PIERCE FL 34982

Title PD  
Name ROLLINS, FRANK  
Address 1291 SW WELLINGTON AVE  
City-State-Zip: PORT SAINT LUCIE FL 34953

Title C  
Name WELCH, WALLACE  
Address 4900 IRRINGTON TERRACE  
City-State-Zip: PORT ST LUCIE FL 34983

Title DIRECTOR  
Name WELCH, TITEUS  
Address 1605 SE PINWOOD TRAIL  
City-State-Zip: PORT ST LUCIE FL 34952

*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: FRANK ROLLINS**

**PD**

**04/12/2016**

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

\_\_\_\_\_  
Date