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.

TREASURER

SIGNATURE: BAILEY, LYNN

Electronic Signature of Signing Officer/Director Detail

Electronic Signature of Registered Agent Officer/Director Detail · Ti Ν Α С

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	PD	Title	TD
Name	NORTON, LEE	Name	BAILEY, LYNN
Address	1355 REMINGTON WAY #5101	Address	15103 ROYAL FERN CT E200
City-State-Zip:	NAPLES FL 34110	City-State-Zip:	NAPLES FL 34110
Title	SECRETARY		
Name	WINKLE, MICHAEL		
Address	8817 MUIRFIELD DRIVE		
City-State-Zip:	NAPLES FL 34109		

12871 TRADE WAY DRIVE BONITA SPRINGS. FL 34135

DOCUMENT# N20000012843

Current Mailing Address:

P.O. BOX 1664 BONITA SPRINGS, FL 34133 US

Current Principal Place of Business:

FEI Number: 85-3969631

Name and Address of Current Registered Agent:

Entity Name: HOPE CITY CHURCH OF NAPLES, INC.

BAILEY, LYNN 15103 ROYAL FERN CT E200 NAPLES, FL 34110 US

FILED Jan 10, 2024 Secretary of State 5429587121CC

Certificate of Status Desired: No

01/10/2024

Date

Date