### 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.

PRESIDENT

SIGNATURE: STEPHEN WOOD

Electronic Signature of Signing Officer/Director Detail

City-State-Zip: NOKOMIS FL 34275

Officer/Director Detail :			
Title	DP	Title	DV
Name	WOOD, STEPHEN D	Name	BURNHAM, JAMES
Address	599 TANYARD ROAD	Address	4800 SAMANTHA LANE
City-State-Zip:	GREENVILLE SC 29605	City-State-Zip:	FARMINGTON NM 87402
Title	DST		
Name	JAQUITH, MICHAEL		
Address	401 HANCHEY DR.		

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.

CT CORPORATION SYSTEM O/C CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

SIGNATURE:

Name and Address of Current Registered Agent:

## 2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# N9200000219

Entity Name: FAMILY LIFE CENTER INTERNATIONAL, INC.

### **Current Principal Place of Business:**

2130 WADE HAMPTON BLVD. GREENVILLE. SC 29615

#### **Current Mailing Address:**

2130 WADE HAMPTON BLVD GREENVILLE, SC 29615 US

## FEI Number: 65-0368234

Electronic Signature of Registered Agent

# Certificate of Status Desired: Yes

FILED Apr 24, 2023 Secretary of State 7315361282CC

Date

04/24/2023

Date