

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N96000001855

**Entity Name:** OAK GROVE LIGHTHOUSE MISSION, INC.**Current Principal Place of Business:**5201 CEDAR POINT RD  
JACKSONVILLE, FL 32226**Current Mailing Address:**5201 CEDAR POINT RD  
JACKSONVILLE, FL 32226 US**FEI Number:** 59-3532981**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**STANLEY, JOHN  
5201 CEDAR POINT RD  
JACKSONVILLE, FL 32226 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	PRESIDENT, TRUSTEE
Name	STANLEY, JOHN
Address	15974 SHARK ROAD W
City-State-Zip:	JACKSONVILLE FL 32226

Title	TRUSTEE
Name	WINGATE, WINDELL
Address	11742 WYNELL RD
City-State-Zip:	JACKSONVILLE FL 32218

Title	TREASURER, TRUSTEE
Name	MILLIGAN, MELODY
Address	10230 SAWPIT ROAD
City-State-Zip:	JACKSONVILLE FL 32226

Title	SECRETARY, TRUSTEE
Name	JENKINS, TONYA
Address	5201 CEDAR POINT RD
City-State-Zip:	JACKSONVILLE FL 32226

Title	TRUSTEE
Name	JENKINS, WILLIAM
Address	14041 CRESTWICK DRIVE EAST
City-State-Zip:	JACKSONVILLE FL 32218

*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: TONYA JENKINS****SECRETARY****01/31/2023**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date