

2024 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:

LARSEN, JIMMY
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: JIMMY LARSEN

02/16/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, TRUSTEE
Name LARSEN, JIMMY
Address 5201 CEDAR POINT RD
City-State-Zip: JACKSONVILLE FL 32226

Title TRUSTEE
Name SPARKS, ROBERT
Address 5201 CEDAR POINT RD
City-State-Zip: JACKSONVILLE FL 32226

Title TREASURER, TRUSTEE
Name SPARKS, NERISSA
Address 5201 CEDAR POINT RD
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

Title TRUSTEE
Name STRAWN, JESSIE
Address 5201 CEDAR POINT RD
City-State-Zip: JACKSONVILLE FL 32226

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: JIMMY LARSEN

PRESIDENT

02/16/2024

Electronic Signature of Signing Officer/Director Detail

Date