2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#768617

FILED Jul 28, 2006 Secretary of State

Entity Name: CATHEDRAL OF PENTECOST, INC.

Current F	Principal Place of Business:	New Principal Place of Business:
5500 PINI DAVIE, F	E ISLAND RD. L 33328	
Current I	Mailing Address:	New Mailing Address:
5500 PINI DAVIE, F	E ISLAND RD. L 33328	
n accorda	r: 59-2290885 FEI Number Applied For() nce with s. 607.193(2)(b), F.S., the corporation o d Address of Current Registered Agen	did not receive the prior notice.
2909 NV	AVID T REV V 23RD STREET KE PINES, FL 33026 US	
	e named entity submits this statement for te of Florida.	the purpose of changing its registered office or registered agent, or both,
SIGNATU	IRE:	
SIGNATL	IRE: Electronic Signature of Registered	d Agent Date
SIGNATU D fficer		Additions/Changes to officers and director
	Electronic Signature of Registered RS AND DIRECTORS: P () Delete ELMS, DAVID T 12909 NW 23RD ST.	
DFFICER ittle: lame: ddress: city-St-Zip: ittle: lame: ddress:	Electronic Signature of Registered RS AND DIRECTORS: P () Delete ELMS, DAVID T 12909 NW 23RD ST. PEMBROKE PINES, FL 33026 S () Delete ELMS, MELANIE 12909 NW 23RD ST.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR Title: () Change () Addition Name: Address:
OFFICER itle: lame: .ddress:	Electronic Signature of Registered RS AND DIRECTORS: P () Delete ELMS, DAVID T 12909 NW 23RD ST. PEMBROKE PINES, FL 33026 S () Delete ELMS, MELANIE 12909 NW 23RD ST. PEMBROKE PINES, FL 33026 T () Delete LESAGE, SUSAN 17851 SW 4TH COURT	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:
DFFICER itle: lame: .ddress: city-St-Zip: itle: lame: .ddress: city-St-Zip: itle: lame: .ddress:	Electronic Signature of Registered RS AND DIRECTORS: P () Delete ELMS, DAVID T 12909 NW 23RD ST. PEMBROKE PINES, FL 33026 S () Delete ELMS, MELANIE 12909 NW 23RD ST. PEMBROKE PINES, FL 33026 T () Delete LESAGE, SUSAN 17851 SW 4TH COURT	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: REV DAVID T ELMS P 07/28/2006