

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 09, 2004 8:00 am
Secretary of State

07-09-2004 90012 011 ****61.25

DOCUMENT # N02033

1. Entity Name
CATHEDRAL OF FAITH CHURCH, PENSACOLA, INC.



Principal Place of Business
**2525 N. DAVIS STREET
PENSACOLA, FL 32503 US**

Mailing Address
**CATHEDRAL OF FAITH P.B. CHURCH
P.O. BOX 18278
PENSACOLA, FL 32523 US**

54061261



2. Principal Place of Business

3. Mailing Address

Cathedral of Faith Church

Suite, Apt. #, etc.

Suite, Apt. #, etc.

P.O. Box 18278

City & State

City & State

Pensacola FL

Zip

Country

Zip

Country

32523 US

01192004 Chg-NP CR2E037 (10/03)

4. FEI Number
59-2330505

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HAWTHORNE, JACK
6634 BELLEVIEW PINES RD
PENSACOLA, FL 32526**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD
LADD, BARBARA S
861 PETUNIA AVE
PENSACOLA, FL 32505** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
ENGLISH, CLARINE K
216 W HIGHLAND DR
PENSACOLA, FL 32503** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
KING, MIRIAM M
301 E MORENO ST
PENSACOLA, FL 32503** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
PEAZANT, CLEO
2156 HILLARY LN
NAVARRE, FL 32566** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
HAWTHORNE, JACK
6634 BELLEVIEW PINES RD
PENSACOLA, FL 32526** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Cleo Peazant
Cleo Peazant

07/07/04
07/07/04

850-939-9134
850-939-9134

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Caytime Phone #