2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **E OCUMENT # N20859**

1. Entity Name

PENTECOSTAL CHURCH OF JESUS CHRIST GOSPEL MINISTRY, INC.



FILED Apr 25, 2007 08:00 A Secretary of State

Principal Place of Business

C/O MARIONETTE BRYANT RT. 2 BOX 122HH QUINCY, FL 32351 US Mailing Address

NEW 911 ADDRESS 207 Charlie Harris Loop Quincy, FL 32351



## DO NOT WRITE IN THIS SPACE

04212007 No Chg-NP C

CR2E037 (4/06)

4. FEI Number 59-2770058

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6.	Name	and	Address	of	Current	Registe	red	Agent

B.RYANT, MARIONETTE 207 CHARLES HARRIS LOOP QUINCY, FL 32351

## DO NOT WRITE IN THIS SPACE

			IN THIS STAGE				
	e named entity submits this statement for the tions of registered agent.	purpose of changing its registere	ed office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with,	and accept	
SIGNATURE.	Signature, typed or printed name of registered agent and titl	e if applicable (NOTE: Registered	d Agent signature	required when reinstating)	DATE		
	Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIRE	CTORS	I				
NAME STEVET ADDRESS CITTUSTED	CDBP BRYANT, MARIONETTE 207 CHARLES HARRIS LOOP QUINCY, FL					013	
NAR E STREET ADDRESS CITÝ-ST-ZIP	DE CHARLESTON, LATHERIA 472 DOGTOWN RD QUINCY, FL 32351				000000730486 05/08/07-80083-012 61.25	5	
NAME STREET ADDRESS CITY-ST-ZIP	DE JONES, STEVEN S 4765 BAINBRIDGE HWY QUINCY, FL 32352			DO	NOT WRITE		
TITLE NAME STR. ET ADDRESS CIT' - ST-ZIP	SD BRADY, VERONICA 207 CHARLIE HARRIS LOOP QUINCY, FL 32351			IN	THIS SPACE		
TITLE NAME STR ET ADDRESS CITY'-ST-ZIP	D SHAW, JAMES JR 4765 BAINBRIDGE HWY QUINCY, FL 32352	er ven	ريدا			ņ	
TITL'E NAME	D MCMULLEN, DARRELL L			-		· risporting	

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 attact ment with an address, with all other like empowered.

**SIGNATURE:** 

STR:ET ADDRESS

CIT' '-ST-ZIP

235 BRADLEY ST

**QUINCY, FL 32351** 

GNATURE AND TYPED OR PRINTED VAME OF SIGNING OFFICER OR DIRECTO

Daytime Phone #