2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2009
Secretary of State

DOCUMENT# N48894

Entity Name: UNITED PENTECOSTAL CHURCH OF OCALA, INC.

Current Principal Place of Business:

5011 N. W. GAINESVILLE ROAD
OCALA, FL 34475 US

New Principal Place of Business:

3300 SW 66TH STREET
OCALA, FL 34476 US

Current Mailing Address:

P.O. BOX 966
OCALA, FL 344780966 US

New Mailing Address:

FEI Number: 59-3121502 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WILLIAMS, C. PATTON
5011 N. W. GAINESVILLE ROAD
OCALA, FL 34475 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: C PATTON WILLIAMS,
Address: 4565 S.E. 48TH PLACE RD.
City-St-Zip: OCALA, FL 34480

Title: D ( ) Delete
Name: THERON REMINGTON,
Address: 2454 N W 57TH PLACE
City-St-Zip: OCALA, FL

Title: D ( ) Delete
Name: JACK THORNE,
Address: 1210 NW 42ND PLACE
City-St-Zip: OCALA, FL 34475

Title: D ( ) Delete
Name: WOMBLES, LEROY
Address: 4340 N. E. 3RD COURT
City-St-Zip: OCALA, FL 34479

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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 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: C. PATTON WILLIAMS PD 01/18/2009
Electronic Signature of Signing Officer or Director — Date