

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002236

FILED
Feb 18, 2008
Secretary of State

Entity Name: TRUE PENTECOSTAL COMMUNITY TEMPLE, INC.

Current Principal Place of Business:

16 S WILSON AVE
COCOA, FL 32922 US

New Principal Place of Business:

Current Mailing Address:

16 S WILSON AVE
COCOA, FL 32922 US

New Mailing Address:

FEI Number: 59-3379225 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KIMBROUGH, CHARLIE
3602 BROPHY BLVD.
COCOA, FL 32926 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: PTD () Delete
Name: KIMBROUGH, CHARLIE
Address: 3602 BROPHY BLVD.
City-St-Zip: COCOA, FL 32926

Title: D () Delete
Name: WASHINGTON, DELIAH
Address: 288 PRICE AVE
City-St-Zip: COCOA, FL 32926

Title: S () Delete
Name: SMITH, CLEONIA
Address: 3635 BRIAN CT.
City-St-Zip: COCOA, FL 32926

Title: D () Delete
Name: GRAVES, LESTER
Address: 610 SOUTH VARR AVENUE
City-St-Zip: COCOA, FL 32926

Title: VD () Delete
Name: KIMBROUGH, BARBARA
Address: 3602 BROPHY BLVD
City-St-Zip: COCOA, FL 32926

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:

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: CHARLIE KIMBROUGH

PTD

02/18/2008

Electronic Signature of Signing Officer or Director

_____ Date