#### 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000002814

Entity Name: CHURCH OF THE LIVING GOD OF THE PENTECOST INC.

FILED
Mar 30, 2016
Secretary of State
CC0534172923

# **Current Principal Place of Business:**

4471 COTSWOLD HILLS DR. LAKE WORTH. FL 33461

# **Current Mailing Address:**

4471 COTSWOLD HILLS DR. LAKE WORTH, FL 33461 US

FEI Number: NOT APPLICABLE Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

JOCELYN, ALFRED 4471 COTSWOLD HILLS DR. LAKE WORTH, FL 33461 US

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

#### Officer/Director Detail:

Title P Title F

Name ALFRED, JOCELYN Name ALFRED, ZULMA
Address 4471 COTSWOLD HILLS DR. Address 6207 PLAINS DR

City-State-Zip: LAKE WORTH FL 33461 City-State-Zip: LAKE WORTH FL 33463

Title VP Title S

Name ANNULYSSE, JEAN Name ANNULYSSE, STALONNE

Address 1541 ALINE CT. Address 1541 ALINE CT.

City-State-Zip: DELRAY BEACH FL 33445 City-State-Zip: DELRAY BEACH FL 33445

Title S Title T

Name MARILUS, NEPTUNE Name ETIENNE, YVONNE
Address 6081 WAYCONDA E. Address 6107 PLAINS DR.

City-State-Zip: LAKE WORTH FL 33463 City-State-Zip: LAKE WORTH FL 33463

I hereby 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 all other like empowered.

SIGNATURE: JOCELYN ALFRED

**PRESIDENT** 

03/30/2016