

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725459

FILED  
Apr 30, 2008  
Secretary of State

Entity Name: PENTECOST POWER CHURCH INC

**Current Principal Place of Business:**

809 NW LUCY ST  
FLORIDA CITY, FL 33034 US

**New Principal Place of Business:**

**Current Mailing Address:**

809 NW LUCY ST  
FLORIDA CITY, FL 33034 US

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SCOTT, FLOYD A BISHOP  
22305 SW 114 COURT  
GOULDS, FL 33170 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: SCOTT, FLOYD A SR.  
Address: 22305 SW 114 COURT  
City-St-Zip: GOULDS, FL 33170

Title: TD ( ) Delete  
Name: DARBY, LONNIE C  
Address: 699 NW 2ND STREET  
City-St-Zip: FLORIDA CITY, FL 33034

Title: M ( ) Delete  
Name: BRYANT, LAWRENCE K SR.  
Address: 353 NW REDLAND RD  
City-St-Zip: FLORIDA CITY, FL 33034

Title: SD ( ) Delete  
Name: DAVIS, AUDREY  
Address: 14751 SW 285 ST,  
City-St-Zip: HOMESTEAD, FL 33033

Title: D ( ) Delete  
Name: WOODS, DORIS  
Address: 28 JUDY PLACE  
City-St-Zip: KEY LARGO, FL 33037

**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: AUDREY DAVIS

SD

04/30/2008

Electronic Signature of Signing Officer or Director

Date