

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 21, 2007 8:00 am
Secretary of State

05-21-2007 90049 025 ****61.25

DOCUMENT # 726290

1. Entity Name

**WEST SIDE CHURCH OF GOD IN CHRIST OF ESCAMBIA
COUNTY, FLORIDA, INC.**



Principal Place of Business

**2313 NORTH G STREET
PENSACOLA FL 32501
US**

Mailing Address

**1230 W YONGE ST
PENSACOLA FL 32501
US**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

05-0088200

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HUFF, COSTON JR
1230 W YONGE ST
PENSACOLA FL 32501**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$81.25
Due By May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME **P**
STREET ADDRESS **WATTS, KENNETH**
CITY-STATE-ZIP **5123 CRESTWOOD DR.
PENSACOLA FL**

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **HUFF, COSTON JR.**
CITY-STATE-ZIP **1230 W. YONGE ST.
PENSACOLA FL**

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **EVANS, PEARLIE MAE**
CITY-STATE-ZIP **1163 WEBSTER DRIVE
PENSACOLA FL 32502**

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **THOMAS, WILLIE R.**
CITY-STATE-ZIP **209 WEBB ST.
CANTONMENT FL**

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **HUFF, FRANKIE LEE.**
CITY-STATE-ZIP **1230 W. YONGE ST.
PENSACOLA FL**

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **WATTS, RALPH**
CITY-STATE-ZIP **1221 EL PASO CIRCLE
PENSACOLA, FLORIDA 32505**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 attachment with an address, with all other like empowered.

SIGNATURE:

Coston Huff

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 11, 2007

Date

Daytime Phone #