2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2006
Secretary of State

DOCUMENT# 731525

Entity Name: WESTSIDE PENTECOSTAL CHURCH, INC.

Current Principal Place of Business:

6102 FILLMORE ST.
HOLLYWOOD, FL 330247934

New Principal Place of Business:

Current Mailing Address:

6102 FILLMORE ST.
HOLLYWOOD, FL 330247934

New Mailing Address:

FEI Number: 59-1999829 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LOVINS, DOUGLAS R.
3908 LYMESTONE DR
COOPER CITY, FL 33026 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:	D	( ) Delete
Name:	GRAY BEAL, PERSHETTA	
Address:	29 BLUEBIRD AVE	
City-St-Zip:	HOLLYWOOD, FL 33023	
Title:	D	( ) Delete
Name:	CAMPBELL, LABELL	
Address:	225 N. 62 AVE. APT. # 225	
City-St-Zip:	HOLLYWOOD, FL 33024	
Title:	VD	( ) Delete
Name:	CAMPBELL, ELI	
Address:	6137 DAWSON ST	
City-St-Zip:	HOLLYWOOD, FL 33023	
Title:	P	( ) Delete
Name:	LOVINS, DOUGLAS R.	
Address:	3908 LYMESTONE DR	
City-St-Zip:	COOPER CITY, FL 33026	
Title:	D	( ) Delete
Name:	SMITH, BETTY	
Address:	4329 S. W. 49 CT.	
City-St-Zip:	FT. LAUDERDALE, FL 33314	
Title:	D	( ) Delete
Name:	ROBERTS, ARTIE MAE	
Address:	5815 BUCHANAN ST	
City-St-Zip:	HOLLYWOOD, FL 33021	

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

I hereby certify that the information supplied with this filing does not qualify for the 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: DOUGLAS R. LOVINS P 04/30/2006
Electronic Signature of Signing Officer or Director — Date