2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#731525

FILED Apr 28, 2008 Secretary of State

Entity Name: WESTSIDE PENTECOSTAL CHURCH, INC.

Current Principal Place of Business:			New Principal Place of Business:
	MORE ST. DOD, FL 3302	247934	
Current Mailing Address:			New Mailing Address:
	MORE ST. DOD, FL 3302	247934	
FEI Number	: 59-1999829	FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()
Name and	d Address of (Current Registered Agent:	Name and Address of New Registered Agent:
LOVINS, DOUGLAS R. 3908 LYMESTONE DR COOPER CITY, FL 33026 US			LOVINS, DOUGLAS R 3908 LYMESTONE DR COOPER CITY, FL 33026 US
	e named entity e of Florida.	submits this statement for the	ourpose of changing its registered office or registered agent, or both
SIGNATU	RE: DOUGLA	AS R. LOVINS	04/28/2008
	Electro	nic Signature of Registered Ag	ent Date
OFFICER	S AND DIREC	CTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO
Title: Name: Address: City-St-Zip:	D (GRAY BEAL, F 29 BLUEBIRD HOLLYWOOD	AVE	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D (CAMPBELL, L 225 N. 62 AVE HOLLYWOOD	. APT. # 225	Title: D (X) Change () Addition Name: CAMPBELL, LABELL Address: 6731 JOHNSON ST. APT. #301 City-St-Zip: HOLLYWOOD, FL 33024
Title: Name: Address: City-St-Zip:	VD (CAMPBELL, E 6137 DAWSON HOLLYWOOD	N ST	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	P (LOVINS, DOVO 3908 LYMEST COOPER CITY	ONE DR	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address:	SMITH, BETTY 4329 S. W. 49		Title: () Change () Addition Name: Address: City-St-Zip:
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: DOUGLAS R. LOVINS P 04/28/2008