

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 760404

FILED  
Feb 24, 2008  
Secretary of State

**Entity Name:** PENTECOSTAL CHURCH OF OUR LORD AND SAVIOR JESUS CHRIST, INC.

**Current Principal Place of Business:**

10223 SW 180TH ST  
PERRINE, FL 33157 US

**New Principal Place of Business:**

**Current Mailing Address:**

10223 SW 180TH ST  
PERRINE, FL 33157 US

**New Mailing Address:**

**FEI Number:** 59-2142172      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

WATSON, SIMEON  
10223 S W 180TH STREET  
PERRINE, FL 33157 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: WATSON, SIMEON,  
Address: 1409 NE 152ND ST  
City-St-Zip: N MIAMI BEACH FL,

Title: VPD ( ) Delete  
Name: WATSON, ELAINE,  
Address: 1409 NE 152ND ST  
City-St-Zip: N MIAMI BEACH FL,

Title: D (X) Delete  
Name: CLARKE, ROSHEBA  
Address: 11941 SW 210 STREET  
City-St-Zip: MIAMI, FL 33177

Title: SD ( ) Delete  
Name: GOLDEN, THERESA A  
Address: 3718 N E 22ND PLACE  
City-St-Zip: HOMESTEAD, FL 33033

Title: TD ( ) Delete  
Name: SILIMON, TIMOTHY  
Address: 260 N W 105 STREET  
City-St-Zip: MIAMI, FL 33150

Title: D ( ) Delete  
Name: JONES, WILLIE  
Address: 2261 N W 58 STREET  
City-St-Zip: MIAMI, FL 33140

**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: TD (X) Change ( ) Addition  
Name: SILIMON, TIMOTHY  
Address: 214 N W 91ST STREET  
City-St-Zip: EL PORTAL, FL 33150

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: SIMEON WATSON

PD

02/24/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date