

FILE NOW: FILING FEE AFTER MAY 1 \$155.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra Ertman
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

DOCUMENT # 768395 (6)

1. Corporation Name

PENTECOSTAL CHURCH OF JESUS CHRIST, INC.

95 MAY -1 PM 9:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

% ELDER ALSTON ADAMS
508 W. 29 STREET
RIVIERA BEACH FL 33404

% ELDER ALSTON ADAM
508 W. 29 STREET
RIVIERA BEACH FL 33404

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/11/1983

3a. Date of Last Report

05/01/1994

4. FEI Number

59-2290134

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

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

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☒

**\$68.75 Supplemental
Fee Not Required**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ADAMS, ELDER ALSTON
508 W. 29 STREET
RIVIERA BEACH FL 33404

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, I, above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME ADAMS, ALSTON
STREET ADDRESS 508 W. 29 STREET
CITY - ST - ZIP RIVIERA BEACH FL

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE STD
NAME BODDEN, JUANITA C.
STREET ADDRESS 3310 AVENUE F
CITY - ST - ZIP RIVIERA BEACH FL

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE D
NAME COE, JOE LEE
STREET ADDRESS 718 47 ST
CITY - ST - ZIP W PALM BCH FL

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE D
NAME ADAMS, MARJORIE
STREET ADDRESS 508 W. 29 STREET
CITY - ST - ZIP RIVIERA BEACH FL

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE D
NAME WILLIAMS, DURVAL
STREET ADDRESS 10 SOUTHERN CROSS CR 102
CITY - ST - ZIP BOYNTON BCH FL

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE D
NAME WILLIAMS, THERESA
STREET ADDRESS 10 SOUTHERN CROSS CR 102
CITY - ST - ZIP BOYNTON BCH FL

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: X

PASYPOR

ALSTON

Adams

11/24/95

4-07-842-7035

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Telephone #