


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 06 2008 10:00 A
Secretary of State

DOCUMENT # 768395 1. Entity Name PENTECOSTAL CHURCH OF JESUS CHRIST, INC.	
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Principal Place of Business % ELDER ALSTON ADAMS 508 W. 29 STREET RIVIERA BEACH, FL 33404	Mailing Address % ELDER ALSTON ADAMS 508 W. 29 STREET RIVIERA BEACH, FL 33404
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01222008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-2290134	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent ADAMS, ELDER ALSTON 508 W. 29 STREET RIVIERA BEACH, FL 33404

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ADAMS, ALSTON 508 W. 29 STREET RIVIERA BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LALOR, GERTRUDE 1718 ESSEX LN RIVIERA BCH, FL 33404
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COE, JOE LEE 716 47 ST W PALM BCH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ADAMS, MARJORIE 508 W. 29 STREET RIVIERA BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ADAMS, JAMES 3425 AVE F RIVIERA BEACH, FL 33404
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ADAMS, CLARISISA 4732 BRADY LANE PALM BEACH GARDENS, FL 33418

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03/13/08-80040-012 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:  DATE: 2/26/08 Daytime Phone #: 842-7035