

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 770622

FILED
Jan 24, 2009
Secretary of State

Entity Name: PENTECOSTAL CHURCH OF GOD IN JESUS, INC.

Current Principal Place of Business:

1663 W 26TH ST
JACKSONVILLE, FL 32209

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 66104
JACKSONVILLE, FL 32208 US

New Mailing Address:

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

Name and Address of Current Registered Agent:

GATES, CALVIN L.
6430 KINLOCKE DRIVE WEST
JACKSONVILLE, FL 32219 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: CD () Delete
Name: GATES, CALVIN LEWIS
Address: 6430 KINLOCKE DRIVE WEST
City-St-Zip: JACKSONVILLE, FL

Title: VD () Delete
Name: GATES, LINDA A
Address: 6430 KINLOCKE DRIVE WEST
City-St-Zip: JACKSONVILLE, FL

Title: SD () Delete
Name: GATES, BARBARA P.,
Address: 6448 THURGOOD CIRCLE WEST
City-St-Zip: JACKSONVILLE, FL

Title: TD () Delete
Name: LOCKLEY, VICKIE E
Address: 6430 KINLOCKE DR W
City-St-Zip: JACKSONVILLE, FL

Title: MD () Delete
Name: GATES, OSCAR L
Address: 6430 KINLOCKE DR, W.
City-St-Zip: JACKSONVILLE, FL

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:

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: VICKIE LOCKLEY

TD

01/24/2009

Electronic Signature of Signing Officer or Director

Date