

**FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

1996 226-96

B-1500

DOCUMENT # 825115 (9)

1. Corporation Name

ASSEMBLY OF PENTECOSTAL CHURCH OF JESUS CHRIST, INC.



Principal Place of Business

Mailing Address

2816 W. 55TH ST.  
CHICAGO IL 60632

2816 W. 55TH ST.  
CHICAGO IL 60632

3. Date Incorporated or Qualified  
09/28/1970

3a. Date of Last Report  
03/17/1995

21 2816 W. 55th St.

26 2816 W. 55th St.

4. FEI Number  
51-0109562

Applied For  
Not Applicable

22 Chicago, Illinois

27 Chicago, Illinois

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees

24 60632

25 60632

29 60632

30 COOK

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ESPINOSA, REV. OCTAVIO  
1900 NORTHWEST 39TH CT.  
CAROL CITY FL 33056

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the 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 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	V	<input type="checkbox"/> DELETE
NAME	TORRES, OTONIEL REV	
STREET ADDRESS	2523 W. CORTEZ	
CITY-ST-ZIP	CHICAGO IL 60622	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MONCLOVA, PABLO REV	
STREET ADDRESS	CALLE 410 MI-23 CC	
CITY-ST-ZIP	CAROLINA PR 00983	
TITLE	P	<input type="checkbox"/> DELETE
NAME	MEDINA, CLOTILDE REV.	
STREET ADDRESS	CALLE E, R12-32 TURABO GDNS	
CITY-ST-ZIP	CAGUAS PR 00726	
TITLE	S	<input type="checkbox"/> DELETE
NAME	MORENO, ANGEL L REV	
STREET ADDRESS	507 N. FAYETTE	
CITY-ST-ZIP	FAYETTE OH 43521	
TITLE	T	<input type="checkbox"/> DELETE
NAME	GERENA, RAMON REV.	
STREET ADDRESS	6047 S. ALBANY ST.	
CITY-ST-ZIP	CHICAGO FL 60629	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	DIAZ, DELFIN REV	
STREET ADDRESS	CALLE 115 BP #8	
CITY-ST-ZIP	CAROLINA PR 00983	

1.1 TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	TORRES, OTONIEL REV	
1.3 STREET ADDRESS	1056 N. California	
1.4 CITY-ST-ZIP	Chicago, Illinois 60622	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	MORENO, ANGEL L. Rev.	
4.3 STREET ADDRESS	2120 W. Middlemass St	
4.4 CITY-ST-ZIP	MILWAUKEE, WIS. 53215	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	Ramos, Hector L Rev.	
6.3 STREET ADDRESS	165 700 Road	
6.4 CITY-ST-ZIP	New Oxford, Pa. 17350	

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)(k), 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: Rev. Angel L. Moreno - Angel L. Moreno

2/09/1996

312-732-7545

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)