

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**May 06, 2008 8:00 am**  
**Secretary of State**

05-06-2008 90030 026 \*\*\*\*61.25

**DOCUMENT # F96000000589**

1. Entity Name

**ALL NATIONS PENTECOST CHURCH OF JESUS CHRIST, INC.**



Principal Place of Business

8365 NE 2ND AVE  
201  
MIAMI FL 33138  
US

Mailing Address

102 N. 13TH ST  
PHOENIX AZ 85034  
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

86-0469320

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PHILOCIN, PIERRE V  
13280 NE 6TH AVE  
APT 302  
MIAMI FL 33161

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reconstituting)

DATE

**FILE NOW - FEE IS \$61.25**  
**Due By May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE CP ☐ Delete  
NAME LORING, ARTHUR  
STREET ADDRESS 102 N. 13TH ST.  
CITY - ST - ZIP PHOENIX AZ 85034

TITLE ST ☐ Delete  
NAME LORING, HARRIET  
STREET ADDRESS 102 N 13TH ST  
CITY - ST - ZIP PHOENIX AZ 85034

TITLE D ☐ Delete  
NAME ARBUCKLE, WILLIE  
STREET ADDRESS 102 N. 13TH ST.  
CITY - ST - ZIP PHOENIX AZ 85034

TITLE D ☐ Delete  
NAME TOMLIN, ELIZABETH  
STREET ADDRESS 102 N 13TH ST  
CITY - ST - ZIP PHOENIX AZ 85034

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

*Arthur Loring* ARTHUR LORING 4/18/08 252 1850 602