

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000263

FILED
Feb 28, 2005
Secretary of State

Entity Name: THE PENTECOSTALS OF ORANGE PARK, CORP.

Current Principal Place of Business:

1241 BLANDING BLVD
#42
ORANGE PARK, FL 32065

New Principal Place of Business:

Current Mailing Address:

1241 BLANDING BLVD
#42
ORANGE PARK, FL 32065

New Mailing Address:

FEI Number: 59-3538131 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

THOMPSON, CHARLES C
2285 MARSH HAWK LANE
APT 1203
ORANGE PARK, FL 32003 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: D () Delete
Name: THOMPSON, CHARLES C
Address: 8145 FIELDSDR
City-St-Zip: JACKSONVILLE, FL 32244

Title: T () Delete
Name: TYRE, EDWIN D
Address: 675 OHARA RD
City-St-Zip: MIDDLEBURG, FL 32068

Title: T () Delete
Name: SHAFFER, RICHARD R
Address: 2220 EAGLES HAMMOCK BLVD
City-St-Zip: MIDDLEBURG, FL 32068

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: THOMPSON, CHARLES C
Address: 2285 MARSH HAWKE LANE
City-St-Zip: ORANGE PARK, FL 32003 US

Title: T (X) Change () Addition
Name: TYRE, EDWIN D
Address: 675 OHARA RD
City-St-Zip: MIDDLEBURG, FL 32068 US

Title: T (X) Change () Addition
Name: SHAFFER, RICHARD R
Address: 2220 EAGLES HAMMOCK BLVD
City-St-Zip: MIDDLEBURG, FL 32068 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: C. CODY THOMPSON

D

02/28/2005

Electronic Signature of Signing Officer or Director

Date