

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jul 13, 2004 8:00 am
Secretary of State

07-13-2004 90002 006 ****62.00

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1. Entity Name

**BEULAH LAND TEMPLE OF GOD CHURCH,
INCORPORATED**



Principal Place of Business

1501 EAST CROSS ST.
PENSACOLA FL 32503

Mailing Address

1501 EAST CROSS ST.
PENSACOLA FL 32503

2. Principal Place of Business

Beulah Land Temple of God Church - 1501 E. Cross St.

3. Mailing Address

Suite, Apt. #, etc.



MOORE

CR2E037 (4/04)

City & State

Pensacola, Florida
Zip *32503* Country *Escambia*

City & State

Pensacola, Florida
Zip *32503* Country *Escambia*

4. FEI Number

59-3701758

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

PITTS, IRENE
1501 EAST CROSS ST.
PENSACOLA FL 32503

7. Name and Address of New Registered Agent

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 reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By September 8, 2004**

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 *PD President* ☐ Delete
NAME PITTS, IRENE - *Irene Pitts*
STREET ADDRESS 1501 EAST CROSS ST.
CITY-ST-ZIP PENSACOLA FL 32503

TITLE *TD Treasurer* ☐ Delete
NAME JERRALDS, MARILYN W - *marilyn jerralds*
STREET ADDRESS 1851 GABLERIDGE TURN
CITY-ST-ZIP WOODBRIDGE VA 22191

TITLE *SD Secretary* ☐ Delete
NAME DICKERSON, DANIELLE M - *Danielle M. Dickerson*
STREET ADDRESS 208 HATCHERS RUN COURT
CITY-ST-ZIP STAFFORD VA 22554

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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12. I hereby certify that the information supplied with this filing does not qualify 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 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: *Bishop Irene Pitts - IRENE PITTS*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/19/04
Date

435-8321
(850) 4357572
Daytime Phone #