



2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N00000005598 1. Entity Name BEULAH LAND TEMPLE OF GOD CHURCH, INCORPORATED				07 SEP 28 AM 8:56 DEPT. OF REVENUE TALLAHASSEE, FLORIDA	
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 - No P.O. Box # 1501 EAST CROSS ST.		3. Mailing Address 1501 E. CROSS ST.		09182007 Chg-NP CR2E037 (12/06)	
City & State PENSACOLA, FLA 32503		City & State PENSACOLA, FLA		4. FEI Number 59-3701758	
Zip 32503		Country ESCAMBIA		5. Certificate of Status Desired <input type="checkbox"/> \$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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State		600110749736 10/12/07--01074--011 **\$1.25			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY - ST - ZIP			TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY - ST - ZIP		
P PITTS, IRENE 1501 EAST CROSS ST. PENSACOLA, FL 32503			T JERRALDS, MARILYN 1851 GABLE RIDGE TURN #304 WOODBIDGE, VA 22191		
S DICKERSON, DANIELLE M 208 HATCHERS RUN COURT STAFFORD, VA 22554			S DICKERSON, DANIELLE M 208 HATCHERS RUN COURT STAFFORD, VA 22554		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Pastor Irene E. Pitts (Pastor/Founder) 9/25/07- 850/4358321 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					