

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 08, 2005 8:00 am
Secretary of State

04-08-2005 90038 015 ****61.25

DOCUMENT # N02000002541

1. Entity Name

POSITIVE POWER EVANGELISM TEAM, INC.



Principal Place of Business

**2350 NW 30 AVE
FT LAUDERDALE FL 33331**

Mailing Address

**2350 NW 30 AVE
FT LAUDERDALE FL 33331**

2. Principal Place of Business

3. Mailing Address

P.O. Box 9323

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**City & State
FT. LAUDERDALE FLA**

Zip

Country

Zip

Country

33310

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**TURNER, OTHEL
5787 W SUNRISE BLVD
PLANTATION FL 33313**

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 May 1, 2005**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME DOWDELL, VERONICA
STREET ADDRESS 2350 NW 30 AVE
CITY-ST-ZIP FT LAUDERDALE FL 33331

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

TITLE VD ☐ Delete
NAME DAVIS, CHERYL
STREET ADDRESS 5626 MAYO ST
CITY-ST-ZIP HOLLYWOOD FL 33023

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

TITLE SD ☐ Delete
NAME DAISE, MARIE
STREET ADDRESS 730 E DAYTON CIR
CITY-ST-ZIP FT LAUDERDALE FL 33312

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

TITLE TD ☐ Delete
NAME NELOMS, JUANITA
STREET ADDRESS 4400 NW 103 ST
CITY-ST-ZIP LAUDERHILL FL 33313

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

TITLE D ☐ Delete
NAME TURNER, PATRICIA
STREET ADDRESS 7100 NW 49 CT
CITY-ST-ZIP LAUDERHILL FL 33319

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

TITLE ☐ Delete
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 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: *Veronica Dowdell* **VERONICA DOWDELL 3/31/05 (954) 7397258**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #