


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

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FILED
Mar 09, 2006 8:00 am
Secretary of State

02-16-2006 90048 014 ****70.00

DOCUMENT # N02000005387 1. Entity Name PENTECOSTAL CHURCH OF CHRIST LIGHT OF THE WORLD, INC.					
Principal Place of Business 15398 S.W. WARFIELD BLVD INDIANTOWN FL 34956				Mailing Address P.O. BOX 1304 INDIANTOWN FL 34956	
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
4. FEI Number 35-2177382				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
ANTONIO, MIGUEL TOMAS REV. 15006 JACKSON AVE INDIANTOWN FL 34956				Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 <i>Miguel T. Antonio</i> <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when resigning) DATE</small>					
FILE NOW - FEE IS \$61.25 Due By: May 1, 2006		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					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	ANTONIO, MIGUEL TOMAS REV.		NAME		
STREET ADDRESS	15006 JACKSON AVE		STREET ADDRESS		
CITY - ST - ZIP	INDIANTOWN FL 34956		CITY - ST - ZIP		
TITLE	SD		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	ANTONIO, FRANCISCO A		NAME		
STREET ADDRESS	15006 JACKSON AVE		STREET ADDRESS		
CITY - ST - ZIP	INDIANTOWN FL 34956		CITY - ST - ZIP		
TITLE	TD		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	ANTONIO, JUAN ANDRES		NAME		
STREET ADDRESS	14528 MARTIN AVE		STREET ADDRESS		
CITY - ST - ZIP	INDIANTOWN FL 34956		CITY - ST - ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			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: <i>Miguel T. Antonio</i>			3-6-06		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>		



ATTACHMENT
66004256

FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 20, 2006

PENTECOSTAL CHURCH OF CHRIST LIGHT OF THE WORLD, INC.
P.O. BOX 1304
INDIANTOWN, FL 34956

Subject: **PENTECOSTAL CHURCH OF CHRIST LIGHT OF THE WORLD, INC.**

Reference Number: **N02000005387**

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$70.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

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ANNUAL REPORTS SECTION