

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006081

FILED
Apr 29, 2009
Secretary of State

Entity Name: FAITH TEMPLE PENTECOSTAL FIRST BORN CHURCH OF WEST HOLLYWOOD INC.

Current Principal Place of Business:

5901 SW 25TH STREET
WEST HOLLYWOOD, FL 330234094

New Principal Place of Business:

Current Mailing Address:

5901 SW 25TH STREET
WEST HOLLYWOOD, FL 330234094

New Mailing Address:

FEI Number: 51-0419743

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DENNARD, ALLEN REV.
5901 SW 25TH STREET
WEST HOLLYWOOD, FL 330234094 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: PD () Delete
Name: DENNARD, ALLEN REV.
Address: PO BOX 16-0795
City-St-Zip: MIAMI, FL 33116

Title: STD () Delete
Name: PEW, DAISY
Address: 3480 NW 207TH STREET
City-St-Zip: MIAMI, FL 33056

Title: D () Delete
Name: RICHARDSON, MAMIE
Address: 21000 NW 31ST AVENUE
City-St-Zip: MIAMI, FL 33056

Title: D () Delete
Name: HEM, CHARITY
Address: 5901 SW 25TH STREET
City-St-Zip: WEST HOLLYWOOD, FL 330234094

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: ALLEN DENNARD

PD

04/29/2009

Electronic Signature of Signing Officer or Director

Date