

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006245

FILED
Mar 24, 2009
Secretary of State

Entity Name: INDEPENDENT PENTECOSTAL CHURCH, INC.

Current Principal Place of Business:

4827 N FAIRWAY DR
PUNTA GORDA, FL 33950

New Principal Place of Business:

Current Mailing Address:

7519 PASPALUM
PUNTA GORDA, FL 33955

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SURGEON, DELORIS
7519 PASPALUM
PUNTA GORDA, FL 33955 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: D () Delete
Name: SURGEON, DELORIS
Address: 7519 PASPALUM
City-St-Zip: PUNTA GORDA, FL 33955

Title: D () Delete
Name: POGGI, JORGE PASTOR
Address: 7519 PASPALUM
City-St-Zip: PUNTA GORDA, FL 33948

Title: D () Delete
Name: CROY, DIANA
Address: 7524 GEWANT BLVD
City-St-Zip: PUNTA GORDA, FL 33982

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:

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: DELORIS SURGEON

D

03/24/2009

Electronic Signature of Signing Officer or Director

Date