2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2009
Secretary of State

DOCUMENT# N03000009817

Entity Name: THE CHURCH OF PENTECOST USA INC FLORIDA DISTRICT

Current Principal Place of Business:

18133 SANDY POINT DR
TAMPA, FL 33647

New Principal Place of Business:

Current Mailing Address:

18133 SANDY POINT DR
TAMPA, FL 33647

New Mailing Address:

FEI Number: 20-0372285 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JOSEPH, ADARKWA A REV.
18133 SANDY POINTE DR
TAMPA, FL 33647 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:	P	( ) Delete
Name:	JOSEPH, ADARKWA A REV	
Address:	18133 SANDY POINTE DR	
City-St-Zip:	TAMPA, FL 33647	
Title:	PE	( ) Delete
Name:	ODAME, SAMUEL	
Address:	18133 SANDY POINTE DR	
City-St-Zip:	TAMPA, FL 33647	
Title:	PE	( ) Delete
Name:	GASSAN, JOSEPH	
Address:	6900 OUTLAW CT #203	
City-St-Zip:	ORLANDO, FL 32818	
Title:	PE	( ) Delete
Name:	ABOAGYE, DANIEL	
Address:	1256 SWIFT STREET	
City-St-Zip:	JACKSONVILLE, FL 32202	
Title:	FS	( ) Delete
Name:	GYIMAH, NOAH	
Address:	9402 BLACKTHORN LOOP	
City-St-Zip:	LAND O LAKES, FL 34638	
Title:	DS	( ) Delete
Name:	KARL, BADU	
Address:	27336 CORAL SPRING	
City-St-Zip:	WESLEY CHAPEL, FL 33544	

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:		
Title:	FS	(X) Change ( ) Addition
Name:	GYIMAH, NOAH MBA,PMP	
Address:	9402 BLACKTHORN LOOP	
City-St-Zip:	LAND O LAKES, FL 34638	
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: NOAH GYIMAH FS 03/20/2009

Electronic Signature of Signing Officer or Director — Date