

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000752

FILED
Apr 25, 2007
Secretary of State

Entity Name: SOUL'S PORT UNITED PENTECOSTAL CHURCH, INC.

Current Principal Place of Business:

9301 MAHAN DRIVE
TALLAHASSEE, FL 323099643

New Principal Place of Business:

Current Mailing Address:

9301 MAHAN DRIVE
TALLAHASSEE, FL 323099643

New Mailing Address:

FEI Number: 59-2402453

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIMS, LARRY W
2416 THORNTON ROAD
TALLAHASSEE, FL 32309 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: T () Delete
Name: GOLDEN, GREGORY
Address: 6363 SOUTH WINDWOOD HILLS CIRCLE
City-St-Zip: TALLAHASSEE, FL 32311

Title: T () Delete
Name: DEAN, LLOYD
Address: 115 CAPTAIN JAMES STREET
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: T () Delete
Name: GARDNER, WALTER
Address: 6362 SOUTH WINDWOOD HILLS CIRCLE
City-St-Zip: TALLAHASSEE, FL 32311

Title: ST () Delete
Name: MALONE, FRANCES
Address: 1472 EAST WINDWOOD WAY
City-St-Zip: TALLAHASSEE, FL 32311

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: FRANCES MALONE

ST

04/25/2007

Electronic Signature of Signing Officer or Director

Date