

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2007 8:00 am
Secretary of State

04-26-2007 90216 041 ****75.00

DOCUMENT # N04000003187			
1. Entity Name PENTECOSTAL CHURCH CHRIST, GOD'S ANSWER TO THE WORLD, INC.			
Principal Place of Business 600 FT. SMITH BLVD DELTONA, FL 32738		Mailing Address 942 N. FAIRBAIRN DR DELTONA, FL 32725	
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address 420 WALNUT ST. Suite, Apt. #, etc.	
City & State City: DELTONA, State: FL		City & State City: COLUMBIA, State: PA	
Zip 32738		Zip 17512	
Country USA		Country USA	
6. Name and Address of Current Registered Agent OTERO-APONTE, MARIA 2950 HARPER ST DELTONA, FL 32738		7. Name and Address of New Registered Agent Name: Victor Rosa Street Address (P.O. Box Number is Not Acceptable): 583 WILBURTON DR. City: DELTONA, State: FL, Zip Code: 32738	
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>Victor Rosa</i> DATE: 4/18/07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input checked="" 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 P NAME APONTE, GREGORIO STREET ADDRESS 942 N. FAIRBAIRN DR CITY-ST-ZIP DELTONA, FL 32725	<input type="checkbox"/> Delete	TITLE P NAME APONTE, GREGORIO STREET ADDRESS 420 WALNUT ST. CITY-ST-ZIP COLUMBIA, PA 17512	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE P NAME OTERO-APONTE, MARIA STREET ADDRESS 942 N. FAIRBAIRN DR CITY-ST-ZIP DELTONA, FL 32725	<input type="checkbox"/> Delete	TITLE P NAME OTERO-APONTE, MARIA STREET ADDRESS 420 WALNUT ST. CITY-ST-ZIP COLUMBIA, PA 17512	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE D NAME SANCHEZ, CARMEN STREET ADDRESS 420 WALNUT ST CITY-ST-ZIP COLUMBIA, PA 17512	<input type="checkbox"/> Delete	TITLE T NAME ROSA, VICTOR STREET ADDRESS 583 WILBURTON DR. CITY-ST-ZIP DELTONA, FL 32738	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE TS NAME ARROYO, IRIS STREET ADDRESS 942 N. FAIRBAIRN DR CITY-ST-ZIP DELTONA, FL 32725	<input checked="" type="checkbox"/> Delete	TITLE S NAME ROSA, MARIA Y. STREET ADDRESS 583 WILBURTON DR. CITY-ST-ZIP DELTONA, FL 32738	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE D NAME SANCHEZ, HECTOR STREET ADDRESS 420 WALNUT ST CITY-ST-ZIP COLUMBIA, PA 17512	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP 	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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>Maria Otero-APONTE</i> OTERO-APONTE <i>April 18, 2007</i> <i>717-342-2045</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>			