

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004296

FILED  
Apr 30, 2008  
Secretary of State

**Entity Name:** THE WHO SO EVER WILL LET THEM COME PENTECOSTAL HOLY CHURCH, INC.

**Current Principal Place of Business:**

7862 1/2 UNTREINER AVE  
PENSACOLA, FL 32534

**New Principal Place of Business:**

**Current Mailing Address:**

7862 1/2 UNTREINER AVE  
PENSACOLA, FL 32534

**New Mailing Address:**

FEI Number: 20-4932688

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WILLIAMS, MARY  
7862 1/2 UNTREINER AVE  
PENSACOLA, FL 32534 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: WILLIAMS, MARY  
Address: 7862 1/2 UNTREINER AVE  
City-St-Zip: PENSACOLA, FL 32534

Title: VPT ( ) Delete  
Name: KCKEE, MIZELL  
Address: 7862 1/2 UNTREINER AVE  
City-St-Zip: PENSACOLA, FL 32534

Title: AT ( ) Delete  
Name: WILLIAMS, DAVID  
Address: 7862 1/2 UNTREINER AVE  
City-St-Zip: PENSACOLA, FL 32534

Title: S ( ) Delete  
Name: LEE, ANICEA  
Address: 7862 1/2 UNTREINER AVE  
City-St-Zip: PENSACOLA, FL 32534

Title: AS ( ) Delete  
Name: WILLIAMS, CORRIE  
Address: 7862 1/2 UNTREINER AVE  
City-St-Zip: PENSACOLA, FL 32534

Title: T ( ) Delete  
Name: MULLENMS, LILLIE  
Address: 7862 1/2 UNTREINER AVE  
City-St-Zip: PENSACOLA, FL 32534

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VPT (X) Change ( ) Addition  
Name: MCKEE, MIZELL  
Address: 7862 1/2 UNTREINER AVE  
City-St-Zip: PENSACOLA, FL 32534

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: MIZELL MCKEE

VPT

04/30/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date