

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000002814

FILED
Feb 16, 2011
Secretary of State

Entity Name: CHURCH OF THE LIVING GOD OF THE PENTECOST INC.

Current Principal Place of Business:

6207 PLAINS DR
LAKE WORTH, FL 33463

New Principal Place of Business:

Current Mailing Address:

6207 PLAINS DR
LAKE WORTH, FL 33463

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:

JOCELYN, ALFRED
6207 PLAINS DR
LAKE WORTH, FL 33463 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
Name: ALFRED, JOCELYN
Address: 6207 PLAINS DR
City-St-Zip: LAKE WORTH, FL 33463

Title: P
Name: ALFRED, ZULMA
Address: 6207 PLAINS DR
City-St-Zip: LAKE WORTH, FL 33463

Title: VP
Name: ANNULYSSE, JEAN
Address: 1541 ALINE CT.
City-St-Zip: DELRAY BEACH, FL 33445

Title: S
Name: ANNULYSSE, STALONNE
Address: 1541 ALINE CT.
City-St-Zip: DELRAY BEACH, FL 33445

Title: S
Name: MARILUS, NEPTUNE
Address: 6081 WAYCONDA E.
City-St-Zip: LAKE WORTH, FL 33463

Title: T
Name: ETIENNE, YVONNE
Address: 6107 PLAINS DR.
City-St-Zip: LAKE WORTH, FL 33463

I hereby 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 all other like empowered.

SIGNATURE: JOCELYN ALFRED

P

02/16/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date