

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010086

FILED
Jul 22, 2009
Secretary of State

Entity Name: CHRISTIAN PENTECOSTAL CHURCH, INC.

Current Principal Place of Business:

1924 W SILVER SPRINGS BLVD
OCALA, FL 34475

New Principal Place of Business:

Current Mailing Address:

PO BOX 2588
OCALA, FL 34478

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

GREEN, MAYBELL
6284 NW 61ST STREET
OCALA, FL 34482 US

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: GREEN II, LUKE J ELDER
Address: 6284 NW 61ST STREET
City-St-Zip: OCALA, FL 34482

Title: S () Delete
Name: COOK, SYNEATHIA
Address: 5721 NW 61ST AVE
City-St-Zip: OCALA, FL 34482

Title: T () Delete
Name: COOK, LOUISE
Address: 4595 NW 61ST LANE
City-St-Zip: OCALA, FL 34482

Title: AT () Delete
Name: JENKINS, TERRY
Address: 2380 NE 13TH AVE
City-St-Zip: OCALA, FL 34470

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: SYNEATHIA COOK

S

07/22/2009

Electronic Signature of Signing Officer or Director

Date