

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13238

FILED  
Mar 20, 2009  
Secretary of State

**Entity Name:** UNITED PENTECOSTAL HOLINESS CHURCH OF CHRIST, INC.

**Current Principal Place of Business:**

C/O IRA MILLER  
4383 NW 51ST COURT  
COCONUT CREEK, FL 33073

**New Principal Place of Business:**

77 NW 5TH STREET  
DEERFIELD BEACH, FL 33441

**Current Mailing Address:**

C/O IRA MILLER  
4383 NW 51ST COURT  
COCONUT CREEK, FL 33073

**New Mailing Address:**

**FEI Number:** 59-2748541      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

MILLER, IRA  
4383 N.W. 51ST COURT  
COCONUT CREEK, FL 33073      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: PCD      ( ) Delete  
Name: MILLER, IRA,  
Address: 4383 N.W. 51ST COURT  
City-St-Zip: COCONUT CREEK, FL

Title: D      ( ) Delete  
Name: BROWN, PEGGY A  
Address: 2460 NW 6TH STREET  
City-St-Zip: POMPANO BEACH, FL 33060

Title: VP      ( ) Delete  
Name: MILLER, BARBARA J  
Address: 4383 NW 51ST CT.  
City-St-Zip: COCONUT CREEK, FL

Title: STD      ( ) Delete  
Name: CARTER, DORA ANNIE  
Address: 2215 NW 8TH STREET  
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: D      ( ) Delete  
Name: ALLEN, GAIL K  
Address: 640 NW 3RD AVE  
City-St-Zip: DEERFIELD BEACH, FL 33441

**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:

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: DORA ANNIE CARTER

STD

03/20/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date