

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30240

FILED  
Jan 18, 2009  
Secretary of State

**Entity Name:** FLORIDA DISTRICT UNITED PENTECOSTAL CHURCH, INC.

**Current Principal Place of Business:**

5011 NW GAINESVILLE ROAD  
OCALA, FL 34475 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 966  
OCALA, FL 34478 US

**New Mailing Address:**

**FEI Number:** 59-2798973

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

WILLIAMS, C. PATTON  
5011 N. W. GAINESVILLE ROAD  
OCALA, FL 34475 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: DT ( ) Delete  
Name: WILLIAMS, C. PATTON,  
Address: 4565 SE 48TH PLACE ROAD  
City-St-Zip: OCALA, FL 34480

Title: DT ( ) Delete  
Name: WELCH, PAUL H.,  
Address: 6567 LAKE CHARLENE DR.  
City-St-Zip: PENSACOLA, FL 32506

Title: DT ( ) Delete  
Name: CRABTREE, ALLEN E  
Address: 515 PARKWOOD DR  
City-St-Zip: PANAMA CITY, FL 32405

Title: DT ( ) Delete  
Name: WILLIAMS, MICHAEL J  
Address: 1566 ISLAY COURT  
City-St-Zip: APOPKA, FL 32712

Title: DT ( ) Delete  
Name: WOLFE, JAMES  
Address: 6916 GREENHILL PLACE  
City-St-Zip: TEMPLE TERRACE, FL 33617

**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: C. PATTON WILLIAMS

DT

01/18/2009

Electronic Signature of Signing Officer or Director

Date