2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2009
Secretary of State

DOCUMENT# N33223

Entity Name: THE PENTACOSTAL CHURCH OF JESUS CHRIST IN THE APOSTOLIC DOCTRINE, INC.

Current Principal Place of Business:

639 MT HOSEA CHURCH RD
QUINCY, FL 32351 US

New Principal Place of Business:

Current Mailing Address:

C/O SHELLY S. ROBINSON
1939 FLAGLER STREET
QUINCY, FL 32351

New Mailing Address:

FEI Number: 59-2959013 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

GREEN, PATRICIA S
201 DUPONT AVE
QUINCY, FL 32351 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: ROBINSON, SHELLY S
Address: 1939 FLAGLER ST
City-St-Zip: QUINCY, FL

Title: D ( ) Delete
Name: GREEN, PATRICIA S
Address: 201 DUPONT AVE
City-St-Zip: QUINCY, FL

Title: SD ( ) Delete
Name: SHAW, MELANIE A
Address: 184 CLOVERLEAF ARDE
City-St-Zip: BAINBRIDGE, GA 39817

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: ROBINSON, SHELLY S
Address: 1939 FLAGLER ST
City-St-Zip: QUINCY, FL 32351

Title: D (X) Change ( ) Addition
Name: GREEN, PATRICIA S
Address: 201 DUPONT AVE
City-St-Zip: QUINCY, FL 32351

Title: SD (X) Change ( ) Addition
Name: GREEN-JONES, SHENITA D MINISTE
Address: 361 THOMAS DRIVE
City-St-Zip: QUINCY, FL 32352

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: SHELLY ROBINSON-CLAY P 04/26/2009

Electronic Signature of Signing Officer or Director — Date