

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 16, 2006 8:00 am**  
**Secretary of State**

03-16-2006 90224 009 \*\*\*\*70.00

**DOCUMENT # N39769**

1. Entity Name  
**POINCIANA PENTECOSTAL CHURCH OF GOD, INC.**



Principal Place of Business  
**4912 PLEASANT HILL RD.  
KISSIMMEE, FL 34759 US**

Mailing Address  
**4912 PLEASANT HILL RD.  
KISSIMMEE, FL 34759 US**

**50003018**



2. Principal Place of Business  
**4912 OLD PLEASANT HILL ROAD**  
Suite, Apt. #, etc.

3. Mailing Address  
**4912 OLD PLEASANT HILL ROAD**  
Suite, Apt. #, etc.

City & State  
**KISSIMMEE, FLORIDA**

City & State  
**KISSIMMEE, FLORIDA**

Zip  
**34759**

Country  
**USA**

Zip  
**34759**

Country  
**USA**

03132006 Chg-NP CR2E037 (11/05)

4. FEI Number  
**59-3046938**

Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**BROWN, ROCKELL Y  
3536 BEAU CHENE DRIVE  
KISSIMMEE, FL 34746**

**7. Name and Address of New Registered Agent**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make check payable to  
Florida Department of State**

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**PD  
BROWN, BARRINGTON E.  
3536 BEAU CHENE DRIVE  
KISSIMMEE, FL 34746** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**VD  
JONES, MARCIA  
646 MILAN DR.  
KISSIMMEE, FL** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**SD  
BROWN, ROCKELL Y.  
3536 BEAU CHENE DRIVE  
KISSIMMEE, FL 34746** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**TD  
WINDLEY, JEROME  
556 BAR DR.  
KISSIMMEE, FL** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**D  
GOLDING, GENELINE  
633 FRESNO COURT  
KISSIMMEE, FL 34758** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**D  
BROWN, JOHNNY N  
504 BRIGHTON COURT  
KISSIMMEE, FL 34758** ☐ Delete

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**VD  
GOLDING, GENELINE  
633 FRESNO COURT  
KISSIMMEE, FL 34758** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**D  
BRANDON, LYSIRA  
4912 OLD PLEASANT HILL ROAD  
KISSIMMEE, FL 34759** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

*Rockell Y. Brown* **Rockell Y. Brown**

**3/13/06 (407) 944-1151**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #