

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44314

FILED  
Apr 26, 2010  
Secretary of State

**Entity Name:** PROVIDENCE CHURCH OF GOD, INC.

**Current Principal Place of Business:**

1990 PROVIDENCE ROAD  
LAKELAND, FL 33805

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 33  
LAKELAND, FL 33802 US

**New Mailing Address:**

**FEI Number:** 59-3246562      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

TABRON, ALBERTHA  
1260 WEST LAKE PARKER DRIVE  
LAKELAND, FL 33801 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  
Name: TABRON, ALBERTHA  
Address: 1260 WEST LAKE PARKER DR  
City-St-Zip: LAKELAND, FL 33805

Title: T  
Name: HARRIS, CHARLOTTE R  
Address: 2904 WEST BELLA VISTA  
City-St-Zip: LAKELAND, FL 33810 US

Title: S  
Name: WILCOX, ANTIONETTE  
Address: 3684 COVINGTON LANE  
City-St-Zip: LAKELAND, FL 33810

Title: VP  
Name: BANKS, WILLIAM  
Address: 1304 FAIRBANKS STREET  
City-St-Zip: LAKELAND, FL 33805

Title: TR  
Name: MCCLOUD, ABRAHAM  
Address: 4025 TIMBERLAKE ROAD WEST  
City-St-Zip: LAKELAD, FL 33810

I hereby 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 all other like empowered.

SIGNATURE: ALBERTHA TABRON

P

04/26/2010

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

\_\_\_\_\_  
Date