2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 05, 2009
Secretary of State

DOCUMENT# N93000002640

Entity Name: PENTECOSTAL REFUGE TEMPLE OF JESUS CHRIST, INC.

Current Principal Place of Business:

PENTECOSTAL REFUGE TEMPLE
MIAMI, FL 33161

New Principal Place of Business:

Current Mailing Address:

144030 N.E. 14TH AVE
NORTH MIAMI, FL 33161

New Mailing Address:

14428 N.E. 14 AVENUE
MIAMI, FL 33161

FEI Number: 65-0416162 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

O'CONNOR, LLOYD
1446 NE 146 STREET
NORTH MIAMI, FL 33161 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:	S	( ) Delete
Name:	DOREEN, MACTARGETTE	
Address:	14428 NE 14 AVE	
City-St-Zip:	NORTH MIAMI, FL 33161	
Title:	V	( ) Delete
Name:	O'CONNOR, ZONA	
Address:	1446 NE 146TH AVE	
City-St-Zip:	NORTH MIAMI, FL 33161	
Title:	PD	( ) Delete
Name:	NOVLETTE, HENRY	
Address:	14428 NE 14 AVE	
City-St-Zip:	NORTH MIAMI, FL 33161	
Title:	T	( ) Delete
Name:	O'CONNOR, DINKINISH	
Address:	1446 NE 146TH AVE	
City-St-Zip:	NORTH MIAMI, FL 33161	
Title:	D	( ) Delete
Name:	O'CONNOR, PEITH	
Address:	14428 NE 14TH AVE	
City-St-Zip:	N MIAMI, FL	
Title:	SPOK	( ) Delete
Name:	MARKS, GWENDOLYN REPRESE	
Address:	12560 COUNTRYSIDE TERRACE	
City-St-Zip:	COOPER CITY, FL 33330	

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:	
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: LLOYD O'CONNOR/ PRESIDENT PRES 06/05/2009

Electronic Signature of Signing Officer or Director — Date