


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 08, 2004 08:00 AM
Secretary of State

DOCUMENT # N93000005530	
1. Entity Name CORNERSTONE PENTACOSTAL CHURCH OF GOD INCORPORATED	

Principal Place of Business 3011 N.W. 195TH ST. CARROLL CITY, FL 33056	Mailing Address 3011 N.W. 195TH ST. CARROLL CITY, FL 33056
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DO NOT WRITE IN THIS SPACE



01222004 No Chg-NP CR2E037 (10/03)

4. FEI Number 65-0488283	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

EPPS, VICTORIA E REV.
3011 N.W. 195TH ST.
CARROLL CITY, FL 33056

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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 Victoria E Epps 3-4-04
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, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE	D
NAME	EPPS, VICTORIA E REV.
STREET ADDRESS	3011 N.W. 195TH ST.
CITY-ST-ZIP	CARROL CITY, FL 33056
TITLE	D
NAME	HENRY, GEORGE
STREET ADDRESS	1226 JANN AVE.
CITY-ST-ZIP	OPALOCA, FL 33054
TITLE	D
NAME	WHITE, EVADNEY
STREET ADDRESS	3020 N.W. 195TH ST.
CITY-ST-ZIP	CARROL CITY, FL 33056
TITLE	D
NAME	EPPS, GEORGE
STREET ADDRESS	3020 NW 195TH ST
CITY-ST-ZIP	CARROL CITY, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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03/08/04-80162-024 70.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Victoria E Epps 3-4-04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #