2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001903

FILED Jan 08, 2004 Secretary of State

Entity Name: FIRST PENTECOSTAL CHURCH OF TITUSVILLE, INC.

Current Mailing Address: New Mailing Address: 1010 NORWOOD AVE TITUSVILLE, FL 32796 FEI Number: 59-2469296 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desire Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KENNEDY, HAROLD REV. 3224 VIRGINIAD RIVE TITUSVILLE, FL 32796 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIR Title: D () Delete Title: () Change () Addition Name: Address: 730 KEY ROAD Address: 301 KEY ROAD Address: 3212 VIRGINIA DRIVE City-St-Zip: TITUSVILLE, FL 32780	Current P	rincipal Place	of Business:	New Principal Place	of Business:
TITUSVILLE, FL 32796 FEI Number S9-2469296 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desire Name and Address of Current Registered Agent: KENNEDY, HAROLD REV. 3224 VIRGINIA DRIVE TITUSVILLE, FL 32796 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent					
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Name and Address of Current Registered Agent: KENNEDY, HAROLD REV. 3224 VIRGINIA DRIVE TITUSVILLE, FL 32796 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent					
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SIGNATURE:	3224 VIRG	INIA DRIVE			
Electronic Signature of Registered Agent OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: D () Delete Name: EASTMAN, DAVID Name: Address: City-St-Zip: Titles: D () Delete Title: D () Delete Title: City-St-Zip: Title: D () Delete Title: Name: Address: City-St-Zip: Titles: City-St-Zip: Address: City-St-Zip: Titles: City-St-Zip: Titles: City-St-Zip: Address: City-St-Zip: Titles: City-St-Zip: Address: Address: Address: City-St-Zip: Address: Add	The chave				
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I hereby certify that the information supplied with this filing does not qualify for the 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 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: HAROLD KENNEDY, 111 MR. 01/08/2004