

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002475

FILED  
Feb 22, 2007  
Secretary of State

**Entity Name:** PENTECOSTAL FELLOWSHIP CENTER CHURCH, INC.

**Current Principal Place of Business:**

1065 KINGS ESTATE RD  
ST AUGUSTINE, FL 32086

**New Principal Place of Business:**

**Current Mailing Address:**

1065 KINGS ESTATE RD  
ST AUGUSTINE, FL 32086

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

BOLES, JOSEPH L JR.  
120 CHARLOTTE ST  
ST AUGUSTINE, FL 32084 US

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

BOLES, JOSEPH L JR.  
19 RIBERIA STREET  
ST AUGUSTINE, FL 32084 US

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:

02/22/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: TURNER, BILLY H SR.  
Address: 1065 KINGS ESTATE RD  
City-St-Zip: ST AUGUSTINE, FL 32086

Title: VD ( ) Delete  
Name: TURNER, LOIS  
Address: 1065 KINGS ESTATE RD  
City-St-Zip: ST AUGUSTINE, FL 32086

Title: STD ( ) Delete  
Name: JONES, PEGGY L  
Address: 1190 KINGS ESTATE RD  
City-St-Zip: ST AUGUSTINE, FL 32086

**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:

I hereby certify that the information supplied with this filing does not qualify for the 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: PEGGY L JONES

STD

02/22/2007

Electronic Signature of Signing Officer or Director

Date