

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000006148

FILED
Apr 06, 2009
Secretary of State

Entity Name: CATHEDRAL OF POWER CHURCH OF GOD IN CHRIST, INC.

Current Principal Place of Business:

2423 5TH STREET N.E.
WINTER HAVEN, FL 33881

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3163
WINTER HAVEN, FL 33885

New Mailing Address:

FEI Number: 59-3479163

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LEWIS, CHARLES E
2105 9TH COURT NE
WINTER HAVEN, FL 33881 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: PD () Delete
Name: LEWIS, CHARLES E
Address: 2105 9TH CT.
City-St-Zip: WINTER HAVEN, FL 338811714

Title: D () Delete
Name: LEWIS, LOTTIE M
Address: 2105 9TH CT. N.E.
City-St-Zip: WINTER HAVEN, FL 338811714

Title: D () Delete
Name: GAINES, WILLIAM
Address: 501 AVE.
City-St-Zip: WINTER HAVEN, FL 338811714

Title: D () Delete
Name: BARNETT, LORETTA
Address: 510 MASE AVE NE
City-St-Zip: WINTER HAVEN, FL 338811714

Title: D () Delete
Name: LOVETT, VEETTA
Address: 375 ORRIN CIR NE
City-St-Zip: WINTER HAVEN, FL 338811714

Title: D () Delete
Name: JOHNSON, J
Address: 2421 TUMBLED WEED TRAIL
City-St-Zip: LAKE WALES, FL 33853

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
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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: CHARLES E LEWIS

PD

04/06/2009

Electronic Signature of Signing Officer or Director

Date