

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 31, 2006 08:00 AM
Secretary of State

DOCUMENT # N95000003023

1. Entity Name
**THE PENTECOASTAL CHURCH OF GOD OF JESUS
CHRIST, INC.**



Principal Place of Business

**304 9TH AVENUE, EAST
BRADENTON, FL 34206**

Mailing Address

**P.O. BOX 533
BRADENTON, FL 34206**



01112008 No Chg-NP

CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEL Number
65-0591350

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fees Required**

6. Name and Address of Current Registered Agent

**JACKSON, HENRY
304 9TH AVENUE, EAST
BRADENTON, FL 34206**

**DO NOT WRITE
IN THIS SPACE**

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

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, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**POTC
JACKSON, HENRY L
304 9TH AVENUE, EAST
BRADENTON, FL 34206**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
JACKSON, GERALDINE
304 9TH AVENUE EAST
BRADENTON, FL 34208**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DT
SCOTT, JULIAN
304 9TH AVENUE, EAST
BRADENTON, FL 34208**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TDT
THOMAS, LINDA B
304 9TH AVENUE, EAST
BRADENTON, FL 34208**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DT
WASHINGTON, BENNIE
304 9TH AVENUE, EAST
BRADENTON, FL 34208**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DT
HALL, DARRYL SR
304 9TH AVENUE, EAST
BRADENTON, FL 34208**

000000412469
02/10/06-80049-001 61.25

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Henry L Jackson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **1-29-06** Daytime Phone #