

**2007 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 18, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N95000003023</b>	
1. Entity Name <b>THE PENTECOASTAL CHURCH OF GOD OF JESUS CHRIST, INC.</b>	
Principal Place of Business <b>304 9TH AVENUE, EAST BRADENTON, FL 34206</b>	Mailing Address <b>P.O. BOX 533 BRADENTON, FL 34206</b>



04062007 No Chg-NP CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>65-0591350</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent  <b>JACKSON, HENRY 304 9TH AVENUE, EAST BRADENTON, FL 34206</b>	<b>DO NOT WRITE IN THIS SPACE</b>
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**Filing Fee is \$61.25  
Due by May 1, 2007**

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	PDTC 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

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04/27/07-80061-001 61.25

**DO NOT WRITE  
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 Lee Jackson  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-7-07  
Date

Daytime Phone #