


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 25, 2008 8:00 am
Secretary of State

02-15-2008 90016 006 ****61.25

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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**

66004920



01162008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

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

6. Name and Address of Current Registered Agent

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

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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 _____ DATE _____
Signature, typed or printed name of registered agent and see if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$81.25
 Due by May 1, 2008**

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 34208
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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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 (941) 748-5579
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNED OFFICER OR DIRECTOR Date Daytime Phone #