## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N95000004773

FILED Apr 07, 2009 Secretary of State

Entity Name: BRENTWOOD UNITED PENTECOSTAL CHURCH OF PENSACOLA, INC.

Current Principal Place of Business:		New Principal Place of Business:
	VALLEY DR DLA, FL 32505	
current Mailing Address:		New Mailing Address:
	VALLEY DR DLA, FL 32505	
El Number:	59-2214940 FEI Number Applied For (	) FEI Number Not Applicable ( ) Certificate of Status Desired ( )
lame and	Address of Current Registered Age	nt: Name and Address of New Registered Agent:
755 NÁNI	OHNNIE A DORA AVENUE DLA, FL 32526 US	
	named entity submits this statement for e of Florida.	r the purpose of changing its registered office or registered agent, or both,
SIGNATUF		D.h.
	Electronic Signature of Registere	
FFICERS	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR
itle: ame:	D () Delete LISTER, JOHNNIE 2755 NANDORA AVE	Title: ( ) Change ( ) Addition Name: Address:
	PENSACOLA, FL 32526	City-St-Zip:
ddress: ity-St-Zip: itle: lame: ddress: ity-St-Zip:		
itle: lame: ddress: itle: itle: lame: ddress: itly-St-Zip: itle: lame: ddress:	PENSACOLA, FL 32526  D ( ) Delete LEISURE, ORVILLE 705 MEADOWVIEW LN	City-St-Zip:  Title: ( ) Change ( ) Addition  Name: Address:
ity-St-Zip: itle: ame: ddress:	PENSACOLA, FL 32526  D ( ) Delete LEISURE, ORVILLE 705 MEADOWVIEW LN PENSACOLA, FL 32514  D ( ) Delete MONEY, GRADY 2295 ATWOOD DR	City-St-Zip:  Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:  Title: ( ) Change ( ) Addition Name: Address:
itle: lame: ddress: itle: lame: ddress: itly-St-Zip: itle: lame: ddress: itty-St-Zip: itle: lame: ddress:	PENSACOLA, FL 32526  D ( ) Delete LEISURE, ORVILLE 705 MEADOWVIEW LN PENSACOLA, FL 32514  D ( ) Delete MONEY, GRADY 2295 ATWOOD DR PENSACOLA, FL 32514  D ( ) Delete MITCHELL, JIMMY 49 EL CINO CIRCLE	City-St-Zip:  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 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: JIMMY K. MITCHELL PAST 04/07/2009