
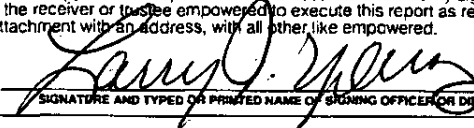


**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)**

**FILED**  
**May 14, 2004 8:00 am**  
**Secretary of State**

04-26-2004 91289 022 \*\*\*\*70.00

DOCUMENT # N96000001448			
1. Entity Name <b>PENTECOSTAL TEMPLE CHURCH OF GOD IN CHRIST, INC. OF PENSACOLA</b>			
Principal Place of Business 212 SOUTH "N" STREET PENSACOLA FL 32501		Mailing Address 212 SOUTH "N" STREET PENSACOLA FL 32501	
2. Principal Place of Business		3. Mailing Address <b>P.O. Box 19033</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State <b>Pensacola Florida</b>	
Zip	Country	Zip	Country
		<b>32523-9033</b>	<b>Escambia</b>
4. FEI Number 59-2368294		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired		<input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent <b>YOUNG, JOHN D SR                  212 SOUTH "N" STREET                  PENSACOLA FL 32501</b>		7. Name and Address of New Registered Agent	
Name		Name	
Street Address (P.O. Box Number is Not Acceptable)		Street Address (P.O. Box Number is Not Acceptable)	
City		City	
FL		Zip Code	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW: FEE IS \$61.25 Due By May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
Make Check Payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	P <input type="checkbox"/> Delete	TITLE	PB <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	YOUNG, JOHN D SR	NAME	John D. Young SR.
STREET ADDRESS	4495 CESSNOCK DR.	STREET ADDRESS	8346 Sunny Acres Lane
CITY-ST-ZIP	PENSACOLA FL 32514	CITY-ST-ZIP	Pensacola, Florida 32514
TITLE	D <input type="checkbox"/> Delete	TITLE	Treasurer <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CASON, FREDDIE III	NAME	Larry J. Young
STREET ADDRESS	105 CAPE DR.	STREET ADDRESS	4495 Cessnock Drive
CITY-ST-ZIP	FORT WALTON BEACH FL 32548	CITY-ST-ZIP	Pensacola FL 32514
TITLE	D <input checked="" type="checkbox"/> Delete	TITLE	Secretary <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MILLER, KATHERINE	NAME	Wilhelmina P. Lewis
STREET ADDRESS	1629 LEPLEY ROAD	STREET ADDRESS	2075 Creighton Road, Apt B
CITY-ST-ZIP	PENSACOLA FL 32534	CITY-ST-ZIP	Pensacola, FL 32504
TITLE	D <input type="checkbox"/> Delete	TITLE	
NAME	YOUNG, DORIS	NAME	
STREET ADDRESS	8346 SUNNY LANE	STREET ADDRESS	
CITY-ST-ZIP	PENSACOLA FL 32514	CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> Delete	TITLE	
NAME	JONES, JAMES	NAME	
STREET ADDRESS	8253 EL DORADO DR	STREET ADDRESS	
CITY-ST-ZIP	PENSACOLA FL 32505	CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> Delete	TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BROWN, CLAUDIA	NAME	Brown-Curry Claudia S
STREET ADDRESS	3190 NORTH 10TH AVENUE	STREET ADDRESS	208 Cushman Street
CITY-ST-ZIP	PENSACOLA FL 32503	CITY-ST-ZIP	Pensacola, FL 32505
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: 		Date: <b>5/9/04</b>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	

**66421642**



MOORE CR2E037 (11/03)