

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002866

FILED  
May 05, 2004  
Secretary of State

**Entity Name:** TRUE PENTECOSTAL TEMPLE OF GOD, INC.

**Current Principal Place of Business:**

11995 S.E. 140TH TERROAD  
OCKLAWAHA, FL 32183

**New Principal Place of Business:**

11995 S.E. 140TH TER. ROAD  
OCKLAWAHA, FL 32183

**Current Mailing Address:**

5506 S.E. 102ND PL RD.  
BELLEVIEW, FL 34420

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MUNFORD, CHARLES L JR  
10711 SE 58TH AVE  
BELLEVIEW, FL 34420 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: MUNFORD, CHARLES L JR.  
Address: 10711 S. 58TH AVENUE  
City-St-Zip: BELLEVIEW, FL 34420

Title: D ( ) Delete  
Name: HEFLIN, EDITH M  
Address: 5506 S.E. 102ND PL. RD.  
City-St-Zip: BELLEVIEW, FL 34420

Title: D ( ) Delete  
Name: HEFLIN, JOHN W JR  
Address: 5506 S.E. 102ND PL. RD.  
City-St-Zip: BELLEVIEW, FL 34420

Title: D ( ) Delete  
Name: HAMILTON, SHIRLEY  
Address: 5 DOGWOOD DR.  
City-St-Zip: OCALA, FL

Title: D ( ) Delete  
Name: SCOTT, GOUIS ANN  
Address: 5506 S.E. 102ND PL. RD.  
City-St-Zip: BELLEVIEW, FL 34420

Title: D ( ) Delete  
Name: MUNFORD, SUSIE R  
Address: 10711 S.E. 58TH AVE.  
City-St-Zip: BELLEVIEW, FL 34420

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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:

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 for the exemption stated in Section 119.07(3)(i), 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: CHARLES L. MUNFORD JR,

D

05/05/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date