

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005787

FILED
Mar 10, 2009
Secretary of State

Entity Name: PENTECOSTAL CHURCH OF GOD IN CHRIST OF JACKSONVILLE, INC.

Current Principal Place of Business:

1668 HIRAM STREET
JACKSONVILLE, FL 32209

New Principal Place of Business:

Current Mailing Address:

1668 HIRAM STREET
JACKSONVILLE, FL 32209

New Mailing Address:

FEI Number: 59-3436043

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TUCKER, DOLLIE MAE
1816 WEST 12TH STREET
JACKSONVILLE, FL 32209 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: PT () Delete
Name: TUCKER, ELDER J
Address: 1678 SEMINARY ST
City-St-Zip: JACKSONVILLE, FL 32209

Title: T () Delete
Name: DOCTOR, ZEBOYE A
Address: 1926 W 3RD ST
City-St-Zip: JACKSONVILLE, FL 32209

Title: ST () Delete
Name: TUCKER, RUBY
Address: 1678 SEMINARY STREET
City-St-Zip: JACKSONVILLE, FL 32209

Title: DRAO () Delete
Name: TUCKER, DOLLIE MAE
Address: 1816 WEST 12TH STREET
City-St-Zip: JACKSONVILLE, FL 32209

Title: DT () Delete
Name: ANDRES, RONALD L
Address: 2216 S. COLLEGE
City-St-Zip: JACKSONVILLE, FL 32209

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: JOHNSON, WANDA T
Address: 1678 SEMINARY STREET
City-St-Zip: JACKSONVILLE, FL 32209

Title: ST (X) Change () Addition
Name: WATSON, SHANETHA
Address: 135 MIDDLE ROAD
City-St-Zip: JACKSONVILLE, FL 32254

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: DOLLIE M. TUCKER

DRAO

03/10/2009

Electronic Signature of Signing Officer or Director

Date