

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000355

FILED  
May 02, 2006  
Secretary of State

Entity Name: PENTECOSTAL MINISTRIES, INC.

**Current Principal Place of Business:**

WEST BAYLOOP ROAD  
FREEPORT, FL 32439

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 638  
FREEPORT, FL 32439

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

CARLTON, CHARLES M SR.  
8437 EASTWOOD AVE.  
YOUNGSTOWN, FL 32466 US

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: P ( ) Delete  
Name: CARLTON, CHARLES M SR.  
Address: 8437 EASTWOOD AVE.  
City-St-Zip: YOUNGSTOWN, FL 32466

Title: D ( ) Delete  
Name: MITCHELL, KENNY  
Address: 441 CATAHOULA ROAD  
City-St-Zip: PONCE DE LEON, FL 32455

Title: D ( ) Delete  
Name: CHANCEY, LINDA  
Address: 79 PINE STREET  
City-St-Zip: FREEPORT, FL 32439

Title: D ( ) Delete  
Name: TAUNTON, JONATHON  
Address: 632 FOUR MILE ROAD  
City-St-Zip: FREEPORT, FL 32439

**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:

I hereby certify that the information supplied with this filing does not qualify for the 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: CHARLES M CARLTON SR.

P

05/02/2006

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

\_\_\_\_\_  
Date