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

SIGNATURE

## Feb 13, 2004 08:00 AM DOCUMENT # N97000000834 **Secretary of State** 1. Entity Name PENTECOSTAL CHURCH OF GOD IN CHRIST UNITED INC. Principal Place of Business Mailing Address 1326 W 9TH ST JACKSONVILLE FL 32209 JACKSONVILLE FL 32209 2. Principal Place of Business 3. Mailing Address Suite Ant # etc. Suite, Apt. #. etc. CR2E037 (11/03) City & State City & State 4. FEI Number Applied For 59-3596915 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GOODMAN, DENNIS L ELDER 7072 CHESHIRE CAT COURT Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE FL 32210 City 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 -Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 Make Check Payable to \$5.00 May Be Trust Fund Contribution. Added to Fees Due By May 1, 2004 Fiorida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TETLE Defete TITLE Change Addition GOODMAN, DENNIS L U00000049969 MANE NAME 7072 CHESHIRE CAT COURT 02/13/04-80044-017 61.25 STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32210 CITY ST-ZIP CITY-ST-ZIP Delete Change Addition TITLE 3371.8 JENNINGS, SYLVIA D NAME NAME 6457 FT CAROLINE RD #176 STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32277 CITY-ST-ZIP CRY-ST-ZIP សមាន Change Change Addition Defete THE BRADLEY, VIVIAN NAME NAME 2914 BEGONIA STREET ADDRESS STREET ADORESS JACKSONVILLE FL 32209 CITY-ST-ZIP CITY-ST-ZIP 3371 \$ ☐ Delete T331 F ☐ Change ☐ Addition MAME MAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP City - ST-ZiP TITLE ☐ ()elete THILE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Defete TITLE Change Addition TITLE \* 41.6F NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or suppliemental 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.

**FILED** 

2-1-2004