

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 20, 2005 8:00 am
Secretary of State

05-20-2005 90031 025 ****70.00

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1. Entity Name

PENTECOSTAL CHURCH OF GOD IN CHRIST UNITED
INC.



Principal Place of Business

1326 W 9TH ST
JACKSONVILLE FL 32209

Mailing Address

1326 W 9TH ST
JACKSONVILLE FL 32209

2. Principal Place of Business

1326 W 9TH ST
Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

Jacksonville

City & State

Florida

Zip

32209

Country

Dual

Zip

Country

4. FEI Number

93-0398260

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E037 (10/04)



6. Name and Address of Current Registered Agent

GOODMAN, DENNIS L ELDER
7072 CHESHIRE CAT COURT
JACKSONVILLE FL 32210

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

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

Dennis L. Goodman

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

T
NAME GOODMAN, DENNIS L ☐ Delete
STREET ADDRESS 7072 CHESHIRE CAT COURT
CITY-ST-ZIP JACKSONVILLE FL 32210

T
NAME JENNINGS, SYLVIA D ☐ Delete
STREET ADDRESS 6457 FT CAROLINE RD #176
CITY-ST-ZIP JACKSONVILLE FL 32277

T
NAME BRADLEY, VIVIAN ☐ Delete
STREET ADDRESS 2914 BEGONIA
CITY-ST-ZIP JACKSONVILLE FL 32209

☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

Pastor
NAME Dennis L Goodman ☐ Change ☐ Addition
STREET ADDRESS 7072 cheshire cat ct
CITY-ST-ZIP Jacksonville, FL 32210

Sylvia D. Jennings ☐ Change ☐ Addition
NAME
STREET ADDRESS 6457 FT. CAROLINE RD. #176
CITY-ST-ZIP JACKSONVILLE, FLA 32277

Mother
NAME Vivian Bradley ☐ Change ☐ Addition
STREET ADDRESS 2914 Begonia Rd
CITY-ST-ZIP Jacksonville, FL 32209

☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition
NAME
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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #