

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001067

FILED
May 06, 2009
Secretary of State

Entity Name: PENTECOSTAL TABERNACLE INTERNATIONAL, INC.

Current Principal Place of Business:

18415 NW 7 AVE
MIAMI, FL 33169 US

New Principal Place of Business:

Current Mailing Address:

18415 NW 7 AVE
MIAMI, FL 33169 US

New Mailing Address:

FEI Number: 65-0696000 FEI Number Applied For () FEI Number Not Applicable () 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:

STEWART, SYDNEY R
1271 NW 175 TERRACE
MIAMI, FL 33169 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: PLUMMER, CHRISTOPHER MR
Address: 1317 NW 159 LANE
City-St-Zip: PEMBROKE PINES, FL 33028

Title: D () Delete
Name: THOMPSON, MICHELLE MRS
Address: 9980 RIVER RUN CIR SOUTH
City-St-Zip: MIRAMAR, FL 33025

Title: D () Delete
Name: HOLNESS, JANET MS
Address: 19359 SW 24TH STREET
City-St-Zip: MIRAMAR, FL 33029

Title: S () Delete
Name: MILLER, WINSTON MR
Address: 3261 LUCERNE WAY
City-St-Zip: MIRAMAR, FL 33025

Title: P () Delete
Name: STEWART, SYDNEY R MR
Address: 1271 NW 175 TERR
City-St-Zip: MIAMI, FL 33169

Title: D () Delete
Name: WILSON, CHRISTOPHER S MR.
Address: 3337 NW 175TH TERRACE
City-St-Zip: MIRAMAR, FL 33029 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: AARONS, HOWARD MR
Address: 6039 TRIP HAMMER ROAD
City-St-Zip: LAKE WORTH, FL 33463

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 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: SYDNEY STEWART

P

05/06/2009

Electronic Signature of Signing Officer or Director

_____ Date