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

## Apr 22, 2005 08:00 AM Secretary of State DOCUMENT # N98000006816 1. Entity Name PENTECOSTAL COMMUNITY SERVICE CENTER #1, INC. Principal Place of Business Mailing Address 2610 NORTHWEST 8TH STREET FORT LAUDERDALE FL 33311 2610 NORTHWEST 8TH STREET FORT LAUDERDALE FL 33311 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/04) Applied For 4. FEI Number City & State City & State 65-0880655 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent Name and Address of Current Registered Agent Name BROWN, ARTHUR Street Address (P.O. Box Number is Not Acceptable) 224 SW 22 AVE FORT LAUDERDALE FL 33312 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 DATE (NOTE, Registered Agent signature required when (einstating) Signature, typed or printed name of registered agent and title if applicable, FILE NOW: FEE IS \$61.25 9. Election Campaign Financing **\$5.00** May Be Make Check Payable to Trust Fund Contribution. Florida Department of State Due By May 1, 2005. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. TITLE ☐ Change ☐ ☐ Addition TITLE Delete U00000323302 POWELL, SCOTT NAME NAME 04/22/05-80047-022 61.25 732 N.W 19 TERR STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33311 CRY-SI-ZP CITY-ST-ZIP PD ☐ Change Addition TITLE Defete TITLE KEMP, VIRGA NAME NAME 3011 N.W. 8TH CT. STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33311 CITY-ST-ZIE CITY-SI-ZIP SD Delete ☐ Change ☐ Addition TITLE WILLIAMS, BETTY J NAME STREET ADDRESS 2741 NW 25 ST STREET ADDRESS FORT LAUDERDALE FL 33311 CITY-ST-ZIP CITY-ST-ZIP TD ☐ Change - 🔲 Addition Delete MILE NEELEY, ORMAND NAME NAME 2061 NW 28 ST STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33311 CHY-SI-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE HANKERSON, JOHN W NAME MAME 1618 NW 13 ST STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33311 CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change Addition TITLE THILE HARLEY, ELLA NAME NAME 2510 NW 31 AVE STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33311 CITY-ST-ZIP 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:

en lisa Kennx

4/19/06 954-321-93

**FILED**