


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 20, 2006 8:00 am
Secretary of State

02-20-2006 90052 013 ****61.25

DOCUMENT # 700615
 1. Entity Name
FORT LAUDERDALE RESCUE TABERNACLE, INC.



Principal Place of Business 9538 HWY. 441 BOYNTON BCH., FL 33437-4604	Mailing Address 9538 HWY. 441 BOYNTON BCH., FL 33437-4604
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DO NOT WRITE IN THIS SPACE



02092006 No Chg-NP CR2E037 (11/05)

4. FEI Number 59-0774188	Applied For Not Applicable
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5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
 WEST, DANIEL L
 7255 S MILITARY TRAIL
 LAKE WORTH, FL 33463

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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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registr. Agent signature required when reinstating)

Filing Fee is \$61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WERTHMAN, STEVEN 1445 JACKSON STREET HOLLYWOOD, FL 33020
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WEST, DANIEL L 7255 S MILITARY TRAIL LAKE WORTH, FL 33463
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROWN, GURNADE 3960 N.W. 47TH AVE. LAUDERDALE LAKES, FL 33068
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V CAMPBELL, RONNIE REV 3831 SW 10TH CT FT LAUDERDALE, FL 33312
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WOODBURN, ROBERT DR 2655 E OAKLAND PARK BLVD FT LAUDERDALE, FL 33306
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HARRIOTT, BENNETTO 3721 NW 27TH CT LAUDERDALE LAKES, FL 33311

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Daniel L West *Treas.* 2/9/06 561 965 4166
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

ATTACHMENT

40015701

700615

D
Read, Bud
1980 NW 9th Ave
Ft. Lauderdale, FL 33311