

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 11, 2002 8:00 am
Secretary of State

03-11-2002 90026 006 ****61.25

0032892

DOCUMENT # 759783

1. Entity Name

WESTGATE TABERNACLE, INC.

Principal Place of Business

Mailing Address

% FLORA BELLE HAIDT
 1700, SUWANNEE DRIVE
 WEST PALM BEACH FL 33409
 US

C/O FLORA BELLE HAIDT
~~1213 SUWANNEE DR.~~ *3060 Westgate Av.*
 WEST PALM BEACH FL 33409



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

~~59-2328617~~

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

HAIDT, FLORA BELLE
~~1213 SUWANNEE DR.~~ *3060 Westgate Av.*
 WEST PALM BEACH FL 33409

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.

SIGNATURE

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

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** Delete
 NAME **SAWYER, ROBERT L**
 STREET ADDRESS **11351 57 ROAD**
 CITY-ST-ZIP **ROYAL PALM BCH. FL**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **STD** Delete
 NAME **HAIDT, FLORA B**
 STREET ADDRESS **~~1213 SUWANNEE DR~~**
 CITY-ST-ZIP **~~W. PALM BCH, FL 00000~~**

TITLE Change Addition
 NAME
 STREET ADDRESS *3060 Westgate Av.*
 CITY-ST-ZIP *W. PALM BEACH, FL. 33409*

TITLE **1VD** Delete
 NAME **CANNON, JAMES LEROY**
 STREET ADDRESS **6790 IMPERIAL DRIVE**
 CITY-ST-ZIP **WEST PALM BEACH FL 33411**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **2VD** Delete
 NAME **HARRISON, ALVY H**
 STREET ADDRESS **301 KENNEDY STREET**
 CITY-ST-ZIP **JUPITER FL 33458**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** Delete
 NAME **HOUSE, EMILY**
 STREET ADDRESS **325 EXECUTIVE CENTER DRIVE**
 CITY-ST-ZIP **WEST PALM BEACH FL 33401**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE 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: *Flora Belle Haidt*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/26/02 (561) 683-3186
 Date Daytime Phone #