

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759783

FILED  
Mar 27, 2006  
Secretary of State

Entity Name: WESTGATE TABERNACLE, INC.

## Current Principal Place of Business:

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

## Current Mailing Address:

% ALLEN CLAPSADDLE  
1722 SUWANEE DR  
WEST PALM BEACH, FL 33409

FEI Number: 59-2328617

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CLAPSADDLE, ALLEN  
146 DUKE DR  
LAKE WORTH, FL 33460 US

## New Principal Place of Business:

WESTGATE TABERNACLE CHURCH  
1700 SUWANNE DRIVE  
WEST PALM BEACH, FL 33409 US

## New Mailing Address:

% ALAN CLAPSADDLE  
1722 SUWANEE DR  
WEST PALM BEACH, FL 33409

## Name and Address of New Registered Agent:

CLAPSADDLE, ALAN  
146 DUKE DR  
LAKE WORTH, FL 33460 US

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: ALAN DALE CLAPSADDLE

03/27/2006

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: SAWYER, ROBERT L.  
Address: 11351 57 ROAD  
City-St-Zip: ROYAL PALM BCH., FL

Title: STD ( ) Delete  
Name: CLAPSADDLE, ALLEN  
Address: 146 DUKE DR  
City-St-Zip: LAKE WORTH, FL 33460

Title: 1VD ( ) Delete  
Name: CANNON, JAMES LEROY  
Address: 6790 IMPERIAL DRIVE  
City-St-Zip: WEST PALM BEACH, FL 33411

Title: 2VD ( ) Delete  
Name: HARRISON, ALVY H  
Address: 301 KENNEDY STREET  
City-St-Zip: JUPITER, FL 33458

Title: 3VD ( ) Delete  
Name: HILL, AVIS L  
Address: 1722 SUWANEE DRIVE  
City-St-Zip: WEST PALM BEACH, FL 33409

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: STD (X) Change ( ) Addition  
Name: CLAPSADDLE, ALAN  
Address: 146 DUKE DR  
City-St-Zip: LAKE WORTH, FL 33460

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 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: ALAN DALE CLAPSADDLE

STD

03/27/2006

Electronic Signature of Signing Officer or Director

Date