

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768959

FILED
Apr 17, 2006
Secretary of State

Entity Name: THE ORIGINAL TABERNACLE OF PRAYER FOR ALL PEOPLE, INC. OF FT. PIERCE

Current Principal Place of Business:

1301 NORTH 27TH STREET
FT. PIERCE, FL 34947

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 2458
FT. PIERCE, FL 34954

New Mailing Address:

FEI Number: 59-2324300 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCKINNON, MICHAEL L JR
415 AVE. A
FT. PIERCE, FL 34950 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: PD () Delete
Name: HINTON, BEVERLY H
Address: 4401 EVERGREEN AVENUE
City-St-Zip: FT. PIERCE, FL 34947

Title: S () Delete
Name: MOORE, DENNIS L
Address: 3309 AVE B
City-St-Zip: FORT PIERCE, FL 34947

Title: AD () Delete
Name: GARDENHIGH, RUBY
Address: 108 GOTHAM DRIVE
City-St-Zip: FT. PIERCE, FL

Title: AAD () Delete
Name: RACKINS, LORETTA
Address: 2502 AVE N
City-St-Zip: FORT PIERCE, FL 34947

Title: TD () Delete
Name: HICKMAN, ANITA
Address: 3401 AVENUE M
City-St-Zip: FT. PIERCE, FL 34947

Title: D () Delete
Name: CARTER, RUBY
Address: 1703 N 12TH STREET
City-St-Zip: FORT PIERCE, FL 34947

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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
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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: BEVERLY H. HINTON

PRES

04/17/2006

Electronic Signature of Signing Officer or Director

_____ Date