

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000002359

**FILED**  
**Jan 05, 2010**  
**Secretary of State**

**Entity Name:** HOLY FAITH TABERNACLE INC.

**Current Principal Place of Business:**

17635 SW 103 AVE  
PERRINE, FL 33157

**New Principal Place of Business:**

**Current Mailing Address:**

10372 SW 151 TERRACE  
MIAMI, FL 33176

**New Mailing Address:**

**FEI Number:** 58-1904466

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BERRY, RONALD BISHOP  
10372 SW 151 TERRACE  
MIAMI, FL 33176 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:** P  
**Name:** BERRY, RONALD  
**Address:** 10372 SW 151 TERR  
**City-St-Zip:** MIAMI, FL 33176

**Title:** V  
**Name:** BERRY, EARNESTINE  
**Address:** 10372 SW 151 TERR  
**City-St-Zip:** MIAMI, FL 33176

**Title:** S  
**Name:** CONEY, BARBARA  
**Address:** 10334 FAIRWAY LIGHT BLVD  
**City-St-Zip:** MIAMI, FL 33157

**Title:** T  
**Name:** HEYWARD, SOLOMAN  
**Address:** 14535 SW 105 CT  
**City-St-Zip:** MIAMI, FL 33176

I hereby 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 all other like empowered.

**SIGNATURE:** RONALD BERRY

P

01/05/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date