

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000003878

FILED  
May 02, 2010  
Secretary of State

**Entity Name:** TABERNACLE OF FAITH INTERNATIONAL MINISTRY CORP

**Current Principal Place of Business:**

148 8TH STREET  
APALACHICOLA, FL 32320

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 701  
APALACHICOLA, FL 32329

**New Mailing Address:**

**FEI Number:** 45-0549782      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

WEBB, THOMAS J JR  
255 11TH STREET  
APALACHICOLA, FL 32320      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** WEBB, THOMAS J JR  
**Address:** 255 11TH STREET  
**City-St-Zip:** APALACHICOLA, FL 32320

**Title:** VP  
**Name:** WEBB, VALENTINA R  
**Address:** 255 11TH STREET  
**City-St-Zip:** APALACHICOLA, FL 32320

**Title:** FIN  
**Name:** GATLIN, GLADYS G  
**Address:** 198 6TH STREET  
**City-St-Zip:** APALACHICOLA, FL 32320

**Title:** SEC  
**Name:** WEBB, ASHLEY K  
**Address:** 255 11TH STREET  
**City-St-Zip:** APALACHICOLA, FL 32320

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: THOMAS J WEBB JR

P

05/02/2010

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

\_\_\_\_\_  
Date