

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 750996

**Entity Name:** THE 1200 THARPE STREET CHURCH, INC.**Current Principal Place of Business:**1200 W THARPE ST.  
TALLAHASSEE, FL 32303**Current Mailing Address:**PO BOX 14835  
TALLAHASSEE, FL 32317 US**FEI Number: 59-2110536****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**DANIEL, STEPHANIE  
4506 BARCLAY LANE  
TALLAHASSEE, FL 32309 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**Officer/Director Detail :**Title D  
Name TODD, ABERNETHY  
Address 3250 ENDICOTT  
City-State-Zip: TALLAHASSEE FL 32311Title D  
Name SWOPE, JOHN P  
Address 9422 WINDAM WAY  
City-State-Zip: TALLAHASSEE FL 32312Title D  
Name CHEESEBOROUGH, HAROLD  
Address 2845 O'HARA DRIVE  
City-State-Zip: TALLAHASSEE FL 32309Title D  
Name BOWEN, STEPHEN W  
Address 3732 MUNDON WAY  
City-State-Zip: TALLAHASSEE FL 32309Title CFO  
Name SHINE, CHERYL A  
Address 1752 FOLKSTONE ROAD  
City-State-Zip: TALLAHASSEE FL 32312Title DIRECTOR  
Name EUGENE, BRANAGAN  
Address 7861 PRESERVATION RD  
City-State-Zip: TALLAHASSEE FL 32312Title DIRECTOR  
Name ANDY, HINTON  
Address 3928 JIULIE BUG CT  
City-State-Zip: TALLAHASSEE FL 32312

*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: CHERYL SHINE****CFO****01/17/2018**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date