

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000010508

Entity Name: UNITED TABERNACLE OF FAITH BAPTIST CHURCH, INC.**Current Principal Place of Business:**2133 W. 39TH STREET
JACKSONVILLE, FL 32209**Current Mailing Address:**8167 WAXWING AVENUE
JACKSONVILLE, FL 32219**FEI Number: 46-1347688****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**MOSLEY, DIANA E REV.
8167 WAXWING AVENUE
JACKSONVILLE, FL 32219 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: DIANA E MOSLEY****04/29/2016**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name MOSLEY, DIANA E PASTOR
Address 8167 WAXWING AVENUE
City-State-Zip: JACKSONVILLE FL 32219

Title VP
Name NEAL, ELLA M CO-PASTOR
Address 8167 WAXWING AVENUE
City-State-Zip: JACKSONVILLE FL 32219

Title TREASURER
Name MOSLEY, JORDAN N
Address 8167 WAXWING AVENUE
City-State-Zip: JACKSONVILLE FL 32219

Title DIRECTOR
Name NEAL, LEROY SR.
Address 8167 WAXWING AVENUE
City-State-Zip: JACKSONVILLE FL 32219

Title ASSISTANT SECRETARY
Name SYKES, HATTIE B
Address 1502 PEBBLE BEACH DR
City-State-Zip: MITCHELLVILLE MD 20720

Title DIRECTOR
Name TORRENCE, ARNETTE LOUISE
Address 7412 NW 51ST WAY
City-State-Zip: COCONUT CREEK FL 33073

Title DIRECTOR
Name ARMSTRONG, MICHAEL T
Address 1817 DENMARK DR.
City-State-Zip: FLEMING ISLAND FL 32003

Title DIRECTOR
Name PETERSON, GEORGE
Address P.O. BOX 12577
City-State-Zip: JACKSONVILLE FL 32209

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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: DIANA E MOSLEY**PRESIDENT****04/29/2016**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	SECRETARY
Name	MOSLEY, ELLA RENE
Address	8167 WAXWING AVENUE
City-State-Zip:	JACKSONVILLE FL 32219