

**2022 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: No****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****04/29/2022**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

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

Title            DIRECTOR  
Name           ARMSTRONG, MICHAEL T  
Address        761 KNOX SPRINGS RD  
City-State-Zip: AUSTELL GA 30168

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

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

Title            DIRECTOR  
Name           TORRENCE, GARY L SR.  
Address        7412 NW 51ST WAY  
City-State-Zip: COCONUT CREEK FL 33073

*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****04/29/2022**

Electronic Signature of Signing Officer/Director Detail

Date