

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 701031

1. Entity Name

THE TABERNACLE, INC.

FILED
Mar 21, 2000 8:00 am
Secretary of State

03-21-2000 90140 001 *****8.75
03-21-2000 90140 002 *****61.25

Principal Place of Business Mailing Address
4141 DESOTO ROAD 4141 DESOTO ROAD
SARASOTA FL 34235 SARASOTA FL 34235-3614

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number 59-1353567 Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WILLMAN, ROBERT GEORGE
1800 SECOND ST. #918
SARASOTA FL 34236

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

8. 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE STD ☐ Delete
NAME WHITEHURST, LEE
STREET ADDRESS 149 ALPINE CIRCLE
CITY-ST-ZIP BRADENTON FL 34208

TITLE PD ☒ Change ☐ Addition
NAME Whitehurst, Lee
STREET ADDRESS 149 Alpine Circle
CITY-ST-ZIP Bradenton, FL. 34208

TITLE PD ☒ Delete
NAME KING, KENNETH
STREET ADDRESS 5844 WHISTLEWOOD CIRCLE
CITY-ST-ZIP SARASOTA FL

TITLE VD ☐ Change ☒ Addition
NAME Albritton, James
STREET ADDRESS 4139 Linwood Street
CITY-ST-ZIP Sarasota, FL. 34232

TITLE VD ☒ Delete
NAME MULLET, WILLIAM JR
STREET ADDRESS 931 TANGLED OAKS DRIVE
CITY-ST-ZIP SARASOTA FL

TITLE D ☐ Change ☒ Addition
NAME Walmsley, Eric
STREET ADDRESS 4680 Cronin Drive
CITY-ST-ZIP Sarasota, FL. 34232

TITLE D ☐ Delete
NAME SCHROCK, WELDON
STREET ADDRESS 2282 ARLINGTON STREET
CITY-ST-ZIP SARASOTA FL 34239

TITLE D ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME EBY, LYNN
STREET ADDRESS 2843 MARK DRIVE
CITY-ST-ZIP SARASOTA FL 34232

TITLE D ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME GREENWOOD, ROBERT
STREET ADDRESS 1301 24TH AVE WEST
CITY-ST-ZIP PALMETTO FL 34221

TITLE STD ☒ Change ☐ Addition
NAME Greenwood, Robert
STREET ADDRESS 1301 24th Ave West
CITY-ST-ZIP Palmetto, FL. 34221

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-15-2000(94)917-1457