FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAR -2 PM 2:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 706044 (5)

1. Corporation Name

TEMPLE TERRACE FAITH ASSEMBLY OF GOD, INC.

Principal Place of Business	Mailing Address
7913 RIVER RIDGE DR TAMPA FL 33637 US	7913 RIVER RIDGE DR TAMPA FL 33637 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/15/1963
3a. Date of Last Report: 04/27/1994
4. FEI Number: 59-1089820 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

MOORE, LARRY
7913 RIVER RIDGE DR
TEMPLE TERR FL 33637

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number Is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	1.1 TITLE	D	☒ Change ☐ Addition
NAME	ALDERMAN, DICK	1.2 NAME	ELAINE DUNCAN	
STREET ADDRESS	413 DUNEDIN AVE	1.3 STREET ADDRESS	8524 N. EL PORTAL	
CITY-ST-ZIP	TEMPLE TERR FL	1.4 CITY-ST-ZIP	TAMPA, FL 33604	
TITLE	D	2.1 TITLE	D	☒ Change ☐ Addition
NAME	WHITAKER, MAYO	2.2 NAME	ALLENE VALENTINE	
STREET ADDRESS	4817 E PONTESETTIA	2.3 STREET ADDRESS	7019 CONIFER DR.	
CITY-ST-ZIP	TAMPA FL	2.4 CITY-ST-ZIP	TAMPA, FL. 33637	
TITLE	DS	3.1 TITLE		☐ Change ☐ Addition
NAME	MCLEAN, ROBERT	3.2 NAME		
STREET ADDRESS	28940 LONGMEADOW LOOP	3.3 STREET ADDRESS		
CITY-ST-ZIP	WESLEY CHAPEL FL	3.4 CITY-ST-ZIP		
TITLE	P	4.1 TITLE		☐ Change ☐ Addition
NAME	MOORE, REV LARRY	4.2 NAME		
STREET ADDRESS	7913 RIVER RIDGE DR	4.3 STREET ADDRESS		
CITY-ST-ZIP	TEMPLE TERR FL	4.4 CITY-ST-ZIP		
TITLE	T	5.1 TITLE	T	☒ Change ☐ Addition
NAME	LEETH, JERRY	5.2 NAME	JUANITA THOMPSON	
STREET ADDRESS	1229 RAINBROOK CIR	5.3 STREET ADDRESS	1319 E. NORFOLK ST.	
CITY-ST-ZIP	VALRICO FL	5.4 CITY-ST-ZIP	TAMPA, FL 33604	
TITLE		6.1 TITLE	D	☒ Change ☐ Addition
NAME		6.2 NAME	JIMMY VALENTINE	
STREET ADDRESS		6.3 STREET ADDRESS	7019 CONIFER DR	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	TAMPA, FL 33637	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Rev. Larry Moore REV. LARRY MOORE 1-23-95 813-988-7925
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0064010