

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jul 07, 2005
Secretary of State**

DOCUMENT# 706437

Entity Name: MOUNT TABOR MISSIONARY BAPTIST CHURCH, INC.

Current Principal Place of Business:

2606 W GRACE ST
TAMPA, FL 336075242

New Principal Place of Business:

Current Mailing Address:

2606 W GRACE ST
TAMPA, FL 336075242

New Mailing Address:

FEI Number: 59-2645242 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

JEFFERSON, JOHNNY
3009 ST CONRAD ST
TAMPA, FL 33607 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: DV () Delete
Name: GILBERT, CHARLES
Address: 70 BAW PARK AVE
City-St-Zip: TAMPA, FL 00000,

Title: D () Delete
Name: JEFFERSON, JOHNNY,
Address: 3009 ST CONRAD ST
City-St-Zip: TAMPA, FL 00000,

Title: S () Delete
Name: COX, JOSEPH
Address: 717 HARLON
City-St-Zip: TAMPA, FL

Title: DP () Delete
Name: WALKER, WILMON
Address: 2520 ST. CONRAD STREET
City-St-Zip: TAMPA, FL

Title: D () Delete
Name: HODGES, JOHNSON
Address: 1801 N. MANHATTAN
City-St-Zip: TAMPA, FL

Title: D () Delete
Name: HICKS, GEORGE
Address: 1318 NASSAU ST
City-St-Zip: TAMPA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: JOSEPH COX

Electronic Signature of Signing Officer or Director

S

07/07/2005

Date