

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 25, 2004 8:00 am
Secretary of State

06-25-2004 90002 037 ****61.25

DOCUMENT # 708878



1. Entity Name
**MOUNT TABOR MISSIONARY BAPTIST CHURCH, INC.
OF TALLEVAST, FLORIDA**

Principal Place of Business
**1703 TALLEVAST ROAD
P.O. BOX 229
TALLEVAST, FL 34270**

Mailing Address
**P.O. BOX 141
TALLEVAST, FL 34270**

54058814



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04282004 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
65-0049709

Applied For
Not Applicable

Zip

Country

Zip

Country

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

**WARD, CLIFFORD BILLY
1605 TALLEVAST ROAD
TALLEVAST, FL 33588**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **PRYOR, LOUIS**
STREET ADDRESS **7610 16TH ST. CT. EAST**
CITY-ST-ZIP **TALLEVAST, FL**

TITLE **D** ☐ Delete
NAME **HEATHERINGTON, HELEN**
STREET ADDRESS **1915 TALLEVAST ROAD**
CITY-ST-ZIP **TALLEVAST, FL**

TITLE **S** ☐ Delete
NAME **THOMAS, SHIRLEY**
STREET ADDRESS **1714 17TH ST. CT. EAST**
CITY-ST-ZIP **TALLEVAST, FL**

TITLE **D** ☐ Delete
NAME **HEATHERINGTON, CLIFFORD**
STREET ADDRESS **1915 TALLEVAST ROAD**
CITY-ST-ZIP **TALLEVAST, FL**

TITLE **T** ☐ Delete
NAME **WARD, CLIFFORD**
STREET ADDRESS **1605 TALLEVAST ROAD**
CITY-ST-ZIP **TALLEVAST, FL**

TITLE **D** ☐ Delete
NAME **WARD, RAYMOND**
STREET ADDRESS **7615 16TH ST. CT. EAST**
CITY-ST-ZIP **TALLEVAST, FL**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Clifford Billy Ward
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

May 5, 2004
Date

Daytime Phone #

54058814

www.sunbiz.org

Division of Corporations

2004 Annual Report

Listed below is the most recent information reported for the entity.
Please review and click the appropriate button at the bottom to generate the annual report form.

This information cannot be changed on the report.

Document
Number

708878

Business Entity
Name

MOUNT TABOR MISSIONARY BAPTIST CHURCH, INC. OF
TALLEVAST, FLORIDA

Original File Date

05/03/1965

FBI Number 65-0049709

Principal Address 1703 TALLAVAST ROAD
P.O. BOX 229
TALLAVAST, FL 34270

Mailing Address P.O. BOX 141
TALLAVAST, FL 34270

Registered Agent CLIFFORD BILLY WARD
1605 TALLEVAST ROAD
TALLEVAST, FL 33588 US

Officer/Director Name And Address

P
LOUIS PRYOR
7610 16TH ST. CT. EAST
TALLEVAST, FL

D
HELEN HEATHERINGTON
1915 TALLEVAST ROAD
TALLEVAST, FL

S
SHIRLEY THOMAS
1714 17TH ST. CT. EAST
TALLEVAST, FL

D
CLIFFORD HEATHERINGTON
1915 TALLEVAST ROAD

Attachment

TALLEVAST, FL

708878

54058814

T
CLIFFORD WARD
1605 TALLEVAST ROAD
TALLEVAST, FL

D
RAYMOND WARD
7615 16TH ST. CT. EAST
TALLEVAST, FL

If all of the above information is correct
and you do not wish to make any
changes, please select:

☐ No Changes

If you need to make changes to
the above information, please
select:

☐ Make Changes

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Annual Report

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Document Number

708878

Business Entity Name

MOUNT TABOR MISSIONARY BAPTIST CHURCH, INC. OF TALLEVAST,
FLORIDA

FEI Number

650049709

FEI-Number Status

☐ Applied For ☐ Not Applicable ☒ CurrentCertificate of Status Desired ☐ Yes ☒ No

Principal Place of Business

Address

1703 TALLAVAST ROAD

Suite, Apt. #, etc.

P.O. BOX 229

City, State

TALLAVAST

FL

Zip Code & Country

34270

Mailing Address

Address

P.O. BOX 141

Suite, Apt. #, etc.

City, State

TALLAVAST

FL

Zip Code & Country

34270

Name And Address of Registered Agent

Name (Last, First, Middle, Title)

WARD

CLIFFORD BILLY

-or- RA Business Name

Address

1605 TALLEVAST ROAD

Suite, Apt. #, etc.

City, State

TALLEVAST

FL

Zip Code & Country

33588

US

If Registered Agent (RA) is changed, the new RA must type their name in the 'Registered Agent Signature' block below. RA signature MUST be an individual name. If the RA is a business entity, an individual must sign on their behalf. A business entity cannot serve as its own RA.

Registered Agent Signature

54058814

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Business Entity Name

MOUNT TABOR MISSIONARY BAPTIST CHURCH, INC. OF TALLEVAST,
FLORIDAElection Campaign Financing Trust Fund Contribution ☐ Yes ☒ No

Officer/Director Name And Address

Title	P
Name (Last, First, Middle, Title)	PRYOR LOUIS
-or- Entity Name	
Street Address	7610 16TH ST. CT. EAST
City, State	TALLEVAST FL
Zip Code & Country	

Title	D
Name (Last, First, Middle, Title)	HEATHERINGTON HELEN
-or- Entity Name	
Street Address	1915 TALLEVAST ROAD
City, State	TALLEVAST FL
Zip Code & Country	

Title	S
Name (Last, First, Middle, Title)	THOMAS SHIRLEY
-or- Entity Name	
Street Address	1714 17TH ST. CT. EAST
City, State	TALLEVAST FL
Zip Code & Country	

Title	D
Name (Last, First, Middle, Title)	HEATHERINGTON CLIFFORD
-or- Entity Name	

Attachment

54058814
708878

Street Address: 1915 TALLEVAST ROAD
City, State: TALLEVAST, FL
Zip Code & Country:

Title: T
Name (Last, First, Middle, Title): WARD CLIFFORD

-or- Entity Name:

Street Address: 1605 TALLEVAST ROAD
City, State: TALLEVAST, FL
Zip Code & Country:

Title: D
Name (Last, First, Middle, Title): WARD RAYMOND

-or- Entity Name:

Street Address: 7615 16TH ST. CT. EAST
City, State: TALLEVAST, FL
Zip Code & Country:

☐ List more than six Officers/Directors ☒ No additional Officers/Directors to list

An individual named above must type their name in the 'Officer/Director Signature' block below. A corporate name is not allowed in this block.

Title:
Officer/Director Signature:

Registered Corporate Agent
Clifford D. Ward

Continue Cancel

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Division of Corporations

Receipt

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Tracking Number: 500033483775

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\$61.25

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