

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 13, 2003 8:00 am
Secretary of State

02-13-2003 90265 030 ****70.00

DOCUMENT # 710310

1. Entity Name
GOD'S FAITH TABERNACLE, INC.



Principal Place of Business

**5508 DIXIE AVE
CALLAHAN FL 32011
US**

Mailing Address

**P.O. BOX 1601
CALLAHAN FL 32011
US**

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 **59-2867788**

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$8.75 Additional
Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**MIDYETTE, JOE REV.
5339 4TH AVENUE
CALLAHAN FL 32011**

7. Name and Address of New Registered Agent

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 *Rev. Joe Midyette*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2-12-2003

FILE NOW: FEE IS \$61.25

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	MIDYETTE, JOE REV.	
STREET ADDRESS	5339 4TH AVENUE	
CITY-ST-ZIP	CALLAHAN FL 32011	
TITLE	ST	☐ Delete
NAME	MIDYETTE, STEPHANIE	
STREET ADDRESS	2455 CONGRESS PLACE	
CITY-ST-ZIP	BRYCEVILLE FL 32009	
TITLE	V	☐ Delete
NAME	MIDYETTE, LINDA REV.	
STREET ADDRESS	5339 4TH AVENUE	
CITY-ST-ZIP	CALLAHAN FL 32011	
TITLE	D	☐ Delete
NAME	COURTNEY, LISA	
STREET ADDRESS	RT. 1, BOX 218	
CITY-ST-ZIP	BRYCEVILLE FL 32011	
TITLE	D	☐ Delete
NAME	CARTER, RITA	
STREET ADDRESS	P.O. BOX 1479 N/A	
CITY-ST-ZIP	CALLAHAN FL 32011	
TITLE	D	☐ Delete
NAME	CARTER, LARRY JR	
STREET ADDRESS	2929 WALLER STREET	
CITY-ST-ZIP	JACKSONVILLE FL 32254	

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	

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: *Rev. Joe Midyette* **RED**

2-12-2003

904-879-5323

CR2E037 (10/02)