

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # 717328

1. Entity Name

TRUTH TABERNACLE, INC.



FILED
Feb 12, 2007 08:00 AM
Secretary of State

Principal Place of Business

652 W. PENIEL RD.
PALATKA FL 32177
US

Mailing Address

P. O. BOX 458
PALATKA FL 32178-7458
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

59-1272760

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

BLOUNT, JOHN A.
652 W. PENIEL RD.
PALATKA FL 32177

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

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

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	BLOUNT, JOHN A.	
STREET ADDRESS	652 W. PENIEL RD.	
CITY-STATE-ZIP	PALATKA FL	
TITLE	V	☐ Delete
NAME	BLOUNT, ELDEN D.	
STREET ADDRESS	111 SILVER LAKE RD	
CITY-STATE-ZIP	PALATKA FL	
TITLE	D	☐ Delete
NAME	REGISTER, RICHARD H.	
STREET ADDRESS	3509 WOODLAND ST.	
CITY-STATE-ZIP	PALATKA FL	
TITLE	D	☐ Delete
NAME	BLOUNT, DONALD D.	
STREET ADDRESS	109 DOMINGO RD	
CITY-STATE-ZIP	SATSUMA FL 32189	
TITLE	ST	☐ Delete
NAME	REGISTER, CAROL L	
STREET ADDRESS	3509 WOODLAND ST	
CITY-STATE-ZIP	PALATKA FL 32177	
TITLE	D	☐ Delete
NAME	BLOUNT, STEVE M.	
STREET ADDRESS	118 CONERSTONE CIR	
CITY-STATE-ZIP	PALATKA FL	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	U00000632605
CITY-STATE-ZIP	02/21/07-80030-010 61.25
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 life empowered.

SIGNATURE:

John A. Blount JOHN A. BLOUNT

2-8-07 386-325-7494