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Feb 12 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1998

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

DOCUMENT # 717884 (1)

1. Corporation Name
THE TABERNACLE CHURCH OF MELBOURNE, INC.

Principal Place of Business	Mailing Address
1619 FERNDALE AVE MELBOURNE FL 32935	1619 FERNDALE AVE MELBOURNE FL 32935

3. Date Incorporated or Qualified: 01/13/1970

4. FEI Number: 59-1170987 ☐ 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. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ 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

REED, SAUNDRA T
1619 FERNDALE AVE
MELBOURNE 32935

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 617.0502 and 617.1508, 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 617.0503, 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	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	WATSON, BROOKS		1.2 NAME		
STREET ADDRESS	1697 WILLARD RD, NW		1.3 STREET ADDRESS		
CITY-ST-ZIP	PALM BAY FL		1.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	GOODRICH, CHARLES		2.2 NAME		
STREET ADDRESS	1804 PINE ST		2.3 STREET ADDRESS		
CITY-ST-ZIP	MELBOURNE BEACH FL		2.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	RANZINO, MARION D		3.2 NAME		
STREET ADDRESS	3905 HIELD RD N.W.		3.3 STREET ADDRESS		
CITY-ST-ZIP	PALM BAY FL		3.4 CITY-ST-ZIP		
TITLE	T	☐ DELETE	4.1 TITLE	VD	☒ Change ☐ Addition
NAME	REED, SAUNDRA		4.2 NAME	McCarthy, Robert	
STREET ADDRESS	1611 EMMAUS RD NW		4.3 STREET ADDRESS	331 Cherry Dr.	
CITY-ST-ZIP	PALM BAY FL		4.4 CITY-ST-ZIP	Satellite Bch, FL 32937	
TITLE	PD	☐ DELETE	5.1 TITLE	D	☒ Change ☐ Addition
NAME	THOMPSON, MICHAEL W.		5.2 NAME	Thompson, Michael W	
STREET ADDRESS	1512 CLOVER CIRCLE		5.3 STREET ADDRESS	1512 Clover Circle	
CITY-ST-ZIP	MELBOURNE FL		5.4 CITY-ST-ZIP	Melbourne, FL 32935	
TITLE	VD	☐ DELETE	6.1 TITLE	PD	☒ Change ☐ Addition
NAME	LEES, DONALD		6.2 NAME	Lees, Donald	
STREET ADDRESS	745 GREENWOOD MANOR CIRCLE		6.3 STREET ADDRESS	47 Marina Isles Blvd	
CITY-ST-ZIP	W MELBOURNE FL		6.4 CITY-ST-ZIP	Indian Harbour Bch, FL 32937	

CR2E037 (10/97)

14. 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 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: Saundra T Reed 2/5/98 407-259-2024