2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 722136

1. Entity Name
CHRIST TEMPLE APOSTOLIC FAITH CHURCH, INC.

Principal Place of Business	Mailing Address
816 9TH ST.	2010 NORMANDY CIRCLE
WEST PALM BEACH, FL 33401	WEST PALM BEACH, FL 33409

DO NOT WRITE IN THIS SPACE

04042008   No Chg-NP   CR2E037 (4/06)

4. FEI Number	Applied For
59-1366535	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BLUNTSON, LULA M.
2010 NORMANDY CIRCLE
WEST PALM BEACH, FL 33409

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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, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

10.   OFFICERS AND DIRECTORS

TITLE	P/D
NAME	BLUNTSON, LULA MAE
STREET ADDRESS	2010 NORMANDY CIRCLE
CITY-ST-ZIP	WEST PALM BEACH, FL 33409

TITLE	VP/D
NAME	JACKSON, ELIZABETH B
STREET ADDRESS	726 48TH ST.
CITY-ST-ZIP	WEST PALM BEACH, FL 33407

TITLE	STD
NAME	WINGATE, MARIAN
STREET ADDRESS	922 30TH COURT
CITY-ST-ZIP	WEST PALM BEACH, FL 33407

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 like empowered.

SIGNATURE: _Lula Mae Blunt_   4/4/08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #