

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735241

FILED
Mar 26, 2010
Secretary of State

Entity Name: APOSTOLIC FAITH TABERNACLE CHURCH, INC.

Current Principal Place of Business:

C/O PASTOR ALBERTA CAMPBELL
616 OLIVE ST
TITUSVILLE, FL 327967649

New Principal Place of Business:

Current Mailing Address:

C/O PASTOR ALBERTA CAMPBELL
616 OLIVE ST
TITUSVILLE, FL 327967649

New Mailing Address:

FEI Number: 59-2386977 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CAMPBELL, ALBERTA
623 WAGER ST
TITUSVILLE, FL 32782 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: CT
Name: CAMPBELL, ALBERTA
Address: 616 OLIVE STREET
City-St-Zip: TITUSVILLE, FL

Title: T
Name: MOORE, JESSIE L
Address: P O BOX 632
City-St-Zip: MIMS, FL 32759

Title: T
Name: MUSGROVE, EUZERA L.
Address: P O BOX 186
City-St-Zip: CLARCONA, FL 32710

Title: T
Name: CHATTMAN, CARRIE
Address: 4055 KIRKLAND BLVD
City-St-Zip: ORLANDO, FL 32811

Title: T
Name: EADDY, JAMES
Address: 1433 KINGS CT.
City-St-Zip: TITUSVILLE, FL 32780

Title: T
Name: CADORE, MICHAEL SR
Address: 1311 HIDEAWAY LANE
City-St-Zip: ROCKLEDGE, FL 32955

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: ALBERTA CAMPBELL

CT

03/26/2010

Electronic Signature of Signing Officer or Director

Date