2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752467

FILED Feb 06, 2005 Secretary of State

Entity Name: APOSTOLIC LIFE TABERNACLE, INC.

Current Principal Place of Business: New Principal Place of Business:

% MARION BRANNON% MARION BRANNONP. O BOX 6113136 PINEWOOD LANECRESTVIEW, FL 32536CRESTVIEW, FL 32539

Current Mailing Address: New Mailing Address:

 % MARION BRANNON
 % MARION BRANNON

 P. O BOX 611
 P. O BOX 1274

 CRESTVIEW, FL 32536
 CRESTVIEW, FL 32536

FEI Number: 59-2870487 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BRANNON, MARION
444 BRACKINS AVE.
CRESTVIEW, FL 32536 US

BRANNON, MARION
444 BRACKINS AVE.
CRESTVIEW, FL 32539 US

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: 02/06/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 PD (X) Change () Addition

 Name:
 GARZA, HUGO
 Name:
 JORDAN, ROLAND B

 Address:
 6032 ROBIN DRIVE
 Address:
 295 BRACKIN ST.

Address: 6032 ROBIN DRIVE Address: 295 BRACKIN ST.
City-St-Zip: CRESTVIEW, FL 32539 City-St-Zip: CRESTVIEW, FL 32539

Title: STD () Delete Title: STD (X) Change () Addition
Name: BRANNON, MARION V
Address: 444 BRACKIN AVE BRACKIN AVE

Title: STD (X) Change () Addition
Name: BRANNON, MARION V
Address: 444 BRACKIN AVE

Address: 444 BRACKIN AVE Address: 444 BRACKIN AVE
City-St-Zip: CRESTVIEW, FL City-St-Zip: CRESTVIEW, FL 32539

Title: VD () Delete Title: () Change () Addition Name: ROGERS. ESTELLE Name:

 Name:
 ROGERS, ESTELLE
 Name:

 Address:
 P.O. BOX 65
 Address:

 City-St-Zip:
 LAUREL HILL, FL 32567
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: MARION V. BRANNON STD 02/06/2005