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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 752517

1. Corporation Name

TABERNACLE CHRISTIAN ASSEMBLY OF GOD, INC.

Principal Place of Business

4800 BALLARD RD. POST OFFICE BOX 50952 FT. MYERS FL 33905

Mailing Address

4800 BALLARD RD. POST OFFICE BOX 50952 FT. MYERS FL 33905



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

30 Country

3. Date Incorporated or Qualified

05/16/1980

4. FEI Number

59-2265697

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

9. Name and Address of Current Registered Agent

CARDONA, JOSE A., JR. 14055 NEVIS DR., S.E. FT. MYERS FL 33905

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE CD [] DELETE

NAME CARDONA, JOSE A., JR. STREET ADDRESS 14055 NEVIS DRIVE S.E. CITY-ST-ZIP FT. MYERS FL

TITLE SD [] DELETE

NAME FLORIAN, ISABEL STREET ADDRESS 38 SKIPTON CIRCLE CITY-ST-ZIP FT. MYERS FL

TITLE TD [] DELETE

NAME CALDERON, FIDENCIA STREET ADDRESS 4563 JERSERY RD. CITY-ST-ZIP FT. MYERS FL

TITLE [] DELETE

NAME STREET ADDRESS CITY-ST-ZIP

TITLE [] DELETE

NAME STREET ADDRESS CITY-ST-ZIP

TITLE [] DELETE

NAME STREET ADDRESS CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE [] Change [] Addition

1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP

2.1 TITLE [] Change [] Addition

2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP

3.1 TITLE [] Change [] Addition

3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP

4.1 TITLE [] Change [] Addition

4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

5.1 TITLE [] Change [] Addition

5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.1 TITLE [] Change [] Addition

6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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, with all other like empowered.

SIGNATURE: JOSE A. CARDONA, JR. 12/98 332-7575

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)