

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 27, 2003 8:00 am**  
**Secretary of State**

08-27-2003 90081 028 \*\*\*\*61.25

**DOCUMENT # 758403**

1. Entity Name

**TABERNACLE HOUSE, INC.**



Principal Place of Business

9725 DOOLITTLE RD.  
JACKSONVILLE FL 32246

Mailing Address

PO BOX 19271  
JACKSONVILLE FL 32246  
US

2. Principal Place of Business

3. Mailing Address

9725 Doolittle Rd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

JACKSONVILLE, FL

Zip

Country

Zip

32246

Country

FLORIDA

4. FEI Number

59-2825758

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DEAL, KEITH M ESQ  
101 BARNETT REGENCY TOWER  
JACKSONVILLE FL 32211

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

**FILE NOW: FEE IS \$61.25**  
**After September 10, 2003, min will be \$236.25**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

T  
NAME: HALLER, ROBERTA J  
STREET ADDRESS: 8720 HARE AVE  
CITY-ST-ZIP: JACKSONVILLE FL

☐ Change ☐ Addition

VD  
NAME: WALTON, LYDIA P.  
STREET ADDRESS: 9725 DOOLITTLE ROAD  
CITY-ST-ZIP: JACKSONVILLE FL

☐ Change ☐ Addition

PTS  
NAME: WALTON, OVID B  
STREET ADDRESS: 9725 DOOLITTLE ROAD  
CITY-ST-ZIP: JACKSONVILLE FL

☐ Change ☐ Addition

D  
NAME: DORMANN, BRENDA  
STREET ADDRESS: 8751 RICARDO LANE  
CITY-ST-ZIP: JACKSONVILLE FL

☒ Change ☐ Addition  
ELSABE BRIERS  
355 MONUMENT RD. APT. 25A1  
JACKSONVILLE, FLA 32225

S  
NAME: BROWN, DEBORAH A  
STREET ADDRESS: 1986 TIMUCUA TRAIL  
CITY-ST-ZIP: MIDDLEBURG FL

☐ Change ☐ Addition

☐ Delete

☐ Change ☐ Addition

12. 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 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:

SIGNATURE REQUIRED

OVID B. WALTON PTS

8-13-03

904-7254989

CR2E037 (4/03)