2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT#761556

FILED Jan 09, 2002 8:00 AM Secretary of State

Entity Name: THE TABERNACLE OF PRAYER AND DELIVERANCE INCORPORATION

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
	H CENTRAL FL 32703	AVE. US		
Current Mailing Address:		New Mailing Address	New Mailing Address:	
P.O. BOX ORLANDO	555336 D, FL 32855	US		
FEI Number	: 59-2584418	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired (X)
Name and	d Address of	Current Registered Agent:	Name and Address o	f New Registered Agent:
2221 [°] PAT	DRGIA ANN TERSON AVE D. FL 32811			
The above	named entity	US submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,
The above in the State	e named entity e of Florida.		ourpose of changing its registered	d office or registered agent, or both,
The above	e named entity e of Florida. RE:			d office or registered agent, or both, Date
The above in the State SIGNATU	e named entity e of Florida. RE:	submits this statement for the prince Signature of Registered Age	ent	
The above in the State SIGNATU	e named entity e of Florida. RE: Electro S AND DIREC	submits this statement for the prince Signature of Registered Age CTORS:) Delete THRETHA, E CT.	ent	Date
The above in the State SIGNATUI OFFICER Title: Name: Address:	e named entity e of Florida. RE: Electro S AND DIREC VD (ROBERSON, 4607 WASSEI ORLANDO, FL	submits this statement for the princ Signature of Registered Age CTORS:) Delete THRETHA, E CT 32818) Delete IA A., SON AVE.	ent ADDITIONS/CHANGE Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS

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: GEORGIA ANN HILL PD 01/09/2002