

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002280

FILED
May 08, 2008
Secretary of State

Entity Name: PT. ST. LUCIE TABERNACLE OF PRAISE, INC.

Current Principal Place of Business:

8414 S. US 1 INSIDE
LAKE PLAZA
PT. ST. L, FL 34952

New Principal Place of Business:

Current Mailing Address:

C/O BETTIN GREENE
2046 S.E. ANCORA COURT
PT. ST. LUCIE, FL 34952

New Mailing Address:

FEI Number: 65-0980166 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

GREENE, BETTIN
C/O BETTIN GREENE
2046 S.E. ANCORA COURT
PT. ST. LUCIE, FL 34952 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CYE () Delete
Name: THOMPSON, KEITH/REGINA
Address: 232 BERMUDA BEACH DRIVE
City-St-Zip: FORT PIERCE, FL

Title: Y.L () Delete
Name: GREENE, LYNN
Address: 2046 SE ANCORA CT
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: PRES () Delete
Name: GREENE, BETTIN
Address: 2046 SE ANCORA COURT
City-St-Zip: PORT SAINT LUCIE, FL 34952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: BETTIN GREENE

PRES

05/08/2008

Electronic Signature of Signing Officer or Director

Date