

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Oct 03, 2002 8:00 am
Secretary of State

09-09-2002 90013 025 ****61.25

DOCUMENT # N01000000502

1. Entity Name

TABERNACLE OF GOD MINISTRIES, INC.

Principal Place of Business

137 LORI ANNE LANE
WINTER SPRINGS FL 32708

Mailing Address

137 LORI ANNE LANE
WINTER SPRINGS FL 32708

2. Principal Place of Business

1605 MERCY DRIVE
Suite, Apt. #, etc.

3. Mailing Address

P.O. BOX 196277
Suite, Apt. #, etc.

City & State

Orlando Florida

City & State

Winter Springs FL

Zip
32808

Country
USA

Zip
32819

Country
USA

4. FEI Number

Applied For
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BROWN, RONALD H
137 LORI ANNE LANE
WINTER SPRINGS FL 32708

7. Name and Address of New Registered Agent

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: *Ronald H. Brown (Ronald H. Brown)*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

8-4-02

After September 13, 2002, min. will be \$236.25.

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input type="checkbox"/> Delete
NAME	BROWN, RONALD H	(D)
STREET ADDRESS	137 LORI ANNE LANE	
CITY-ST-ZIP	WINTER SPRINGS FL 32708	D
TITLE	D	<input type="checkbox"/> Delete
NAME	BROWN, DOROTHY E	
STREET ADDRESS	137 LORI ANNE LANE	
CITY-ST-ZIP	WINTER SPRINGS FL 32708	D
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	LAWSON, MARCEDUS	
STREET ADDRESS	2110 FIESTA CT.	
CITY-ST-ZIP	ORLANDO FL 32811	
TITLE		<input type="checkbox"/> Delete
NAME	KIMESHA JENKINS	
STREET ADDRESS	2926 Fitzgerald St	(T)
CITY-ST-ZIP	Jacksonville, FL 32254	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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NAME		
STREET ADDRESS		
CITY-ST-ZIP		

CFR2037 (4/02)

12. I hereby certify that the information supplied with this filing does not qualify 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 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: *Ronald H. Brown* (RONALD H. BROWN) 8-4-02 407-327-6740
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #