

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000000511

**FILED**  
**Apr 25, 2010**  
**Secretary of State**

**Entity Name:** SPIRIT WIND TABERNACLE, INC.

**Current Principal Place of Business:**

1652 OLD BRADENTON ROAD  
WAUCHULA, FL 33873

**New Principal Place of Business:**

**Current Mailing Address:**

1652 OLD BRADENTON ROAD  
WAUCHULA, FL 33873

**New Mailing Address:**

**FEI Number:** 59-3694954

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WILLIAMS, LAURENCE C REV.  
1652 OLD BRADENTON ROAD  
WAUCHULA, FL 33873 US

**Name and Address of New Registered Agent:**

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: APDT  
Name: WILLIAMS, LAURENCE C REV.  
Address: 1652 OLD BRADENTON ROAD  
City-St-Zip: WAUCHULA, FL 33873

Title: DT  
Name: ALBRITTON, EDNA  
Address: 1744 STATE ROAD 62  
City-St-Zip: BOWLING GREEN, FL 33834

Title: DT  
Name: RICHARDSON, CLIFFORD  
Address: 607 PEACE DRIVE  
City-St-Zip: WAUCHULA, FL 33873

Title: DTS  
Name: WILLIAMS, DARLENE E  
Address: 1652 OLD BRADENTON ROAD  
City-St-Zip: WAUCHULA, FL 33873

I hereby 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 all other like empowered.

SIGNATURE: REV. LAURENCE C. WILLIAMS

APDT

04/25/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date