

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002635

FILED
Jan 16, 2009
Secretary of State

Entity Name: TABERNACLE OF PRAISE MINISTRIES, INC.

Current Principal Place of Business:

%INFELD BARR & COMPANY
4621 HOLLYWOOD BLVD
HOLLYWOOD, FL 33021

New Principal Place of Business:

Current Mailing Address:

256 CHURCH ROAD
BRANSON, MO 65616

New Mailing Address:

FEI Number: 65-1033141

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

STORCH, JEREMY
%INFELD BARR & COMPANY
4621 HOLLYWOOD BLVD
HOLLYWOOD, FL 33021 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: PD () Delete
Name: STORCH, JEREMY
Address: %INFELD BARR & COMPANY
City-St-Zip: HOLLYWOOD, FL 33021

Title: VS () Delete
Name: STORCH, BRENDA
Address: 4621 HOLLYWOOD BLVD
City-St-Zip: HOLLYWOOD, FL 33021

Title: D () Delete
Name: DYER, RICK
Address: 27027 E 91ST STREET
City-St-Zip: BROKEN ARROW, OK 74014

Title: D () Delete
Name: DYER, CAROL
Address: 27027 E 91ST STREET
City-St-Zip: BROKEN ARROW, OK 74014

Title: D () Delete
Name: SCHWARK, HOWARD
Address: 149 BULL RUN
City-St-Zip: BRANSON, MO 65616

Title: D () Delete
Name: SCHWARK, LAGENA
Address: 149 BULL RUN
City-St-Zip: BRANSON, MO 65616

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:

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

Title: () Change () Addition
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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: BRENDA STORCH

VS

01/16/2009

Electronic Signature of Signing Officer or Director

Date