2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2005 8:00 am
Secretary of State
03-31-2005 90057 028 ****61.25

DOCUMENT # N01000007833

1. Entity Name
REFUGE OF LOVE TABERNACLE INC.

Principal Place of Business	Mailing Address
1001 SPACE CIRCLE PENSACOLA, FL 32504	1001 SPACE CIRCLE PENSACOLA, FL 32504

03272005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
7280 Plantation Rd.	
Suite, Apt. #, etc. Suite I	Suite, Apt. #, etc.
City & State Pensacola FL.	City & State
Zip 32514 Country ESCAMBIA	Zip Country

4. FEI Number
59-3757807
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
LONG, THOMAS G JR. 1001 SPACE CIRCLE PENSACOLA, FL 32504	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PDT. LONG, THOMAS 1001 SPACE CIRCLE PENSACOLA, FL 32504	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VTS LONG, DEBRA D 1001 SPACE CIRCLE PENSACOLA, FL 32504	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT BEACHEM, JERRY 6019 AIRLANE DR PENSACOLA, FL 32504	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT Bessie Beachem 6019 Airlane DR. Pensacola, FL. 32504	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BLOXSON, SHONDRA 7102 B TIPPEN AVE PENSACOLA, FL 32504	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: _____ Thomas G. Long JR. 3/28/05 850 5547530
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #