

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000468

FILED
Mar 30, 2006
Secretary of State

Entity Name: BRANFORD TABERNACLE, INC.

Current Principal Place of Business:

P.O. BOX 1413
BRANFORD, FL 32008

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1413
BRANFORD, FL 32008

New Mailing Address:

FEI Number: 59-3503396 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

APPELL, CANDACE L
26244 HWY 129
BRANFORD, FL 32008 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: APPELL, ALFRED
Address: 26244 HWY 129
City-St-Zip: BRANFORD, FL 32008

Title: VPD () Delete
Name: APPELL, CANDANCE
Address: 26244 HWY 129
City-St-Zip: BRANFORD, FL 32008

Title: STD () Delete
Name: RICKETT, PEGGY T
Address: 26265 83 ROAD
City-St-Zip: BRANFORD, FL 32008

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 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: ALFRED APPELL

PD

03/30/2006

Electronic Signature of Signing Officer or Director

_____ Date