

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004051

FILED
May 01, 2005
Secretary of State

Entity Name: L'EGLISE BAPTISTE DU TABERNACLE, INC.

Current Principal Place of Business:

3456 5TH AVE NORTH
ST. PETERSBURG, FL 33713

New Principal Place of Business:

Current Mailing Address:

3456 5TH AVE NORTH
ST. PETERSBURG, FL 33713

New Mailing Address:

FEI Number: 04-3629001 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SAINT JACQUES, OLIANT
5325 4TH ST SOUTH
ST. PETERSBURG, FL 33705 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: D () Delete
Name: ELIACIN, PIERRE L
Address: 2690 DREW ST. APT. 842
City-St-Zip: CLEARWATER, FL 33759

Title: T () Delete
Name: ST JACQUES, NADEGE
Address: 5325 4TH ST S
City-St-Zip: ST PETERSBURG, FL 33705

Title: T () Delete
Name: CHARLES, KETTELIE
Address: 5463 B LYNN LAKE DR S
City-St-Zip: ST PETERSBURG, FL 33712

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ELIACIN, PIERRE L
Address: 2690 DREW ST. APT. 908
City-St-Zip: CLEARWATER, FL 33759

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 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 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: PIERRE L AMY ELIACIN

D

05/01/2005

Electronic Signature of Signing Officer or Director

Date