2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005111

Entity Name: NEW IMAGE TABERNACLE, INCORPORATED

FILED Apr 30, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

11 KINGSMAN CIR 2500 EDWARDS DRIVE FT MYERS, FL 33905 FT MYERS, FL 33905

Current Mailing Address: New Mailing Address:

11 KINGSMAN CIR P.O. BOX 50178 FT MYERS, FL 33905 FT MYERS, FL 33994

FEI Number: 74-3054377 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

STOCKTON, ALAN B 11 KINGSMAN CIR FT MYERS, FL 33905

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:

Cleater in Circusture of Devictor of America

Electronic Signature of Registered Agent

US

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D
 () Delete
 Title:
 D
 (X) Change () Addition

 Name:
 CULLIVER, SHERRILL
 Name:
 WILLIAMS, DONNIE

 Address:
 913 SE 27TH TERR
 Address:
 2595 62ND AVENUE, SOUTH

 City-St-Zip:
 CAPE CORAL, FL 33904
 City-St-Zip:
 SAINT PETERSBURG, FL 33712 US

Title: D () Delete Title: D (X) Change () Addition Name: JENKINS, PATRICIA Name: STOCKTON, MARY L

 Address:
 4751 ZANA DR
 Address:
 2595 62ND AVENUE, SOUTH

 City-St-Zip:
 FT MYERS, FL 33905
 City-St-Zip:
 SAINT PETERSBURG, FL 33712 US

Title: D () Delete Title: D (X) Change () Addition

 Name:
 FERRELL, ELISABETH
 Name:
 WILLIAMS, BEVERLY

 Address:
 2379 DOVER AVE
 Address:
 3850 CENTRAL AVENUE, #303

 City-St-Zip:
 FT MYERS, FL 33907
 City-St-Zip:
 FT MYERS, FL 33901 US

 Name:
 HUDSON, GLENDA
 Name:
 JANIE, STOCKTON

 Address:
 3028 ST CHARLES ST
 Address:
 3850 CENTRAL AVENUE, #303

 City-St-Zip:
 FT MYERS, FL 33901
 City-St-Zip:
 FT MYERS, FL 33901 US

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: MARY L. STOCKTON D 04/30/2007