

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 17, 2004 8:00 am
Secretary of State

05-17-2004 90008 023 ****61.25

DOCUMENT # N02000008256

1. Entity Name

**TABERNALE OF PRAISE CHURCH OF GOD IN CHRIST,
INC.**



Principal Place of Business

**10 W. RACE TRACK ROAD
FORT WALTON BEACH FL 32547**

Mailing Address

**10 W. RACE TRACK RD.
FORT WALTON BEACH FL 32547**

24075773



MOORE CR2E037 (11/03)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

01-0587171

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**CUNNINGHAM, JAMES N
15 MAYA STREET
HURLBURT FIELD FL 32544**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2004**

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

TITLE NAME CUNNINGHAM, JAMES N ☐ Delete
STREET ADDRESS 15 MAYO STREET
CITY-ST-ZIP HURLBURT FIELD FL 32544

TITLE NAME VP THOMAS, GARY D ☒ Delete
STREET ADDRESS 101 HUMMINGBIRD AVE. N.W.
CITY-ST-ZIP FORT WALTON BEACH FL 32548

TITLE NAME T POE, ARTIS M ☐ Delete
STREET ADDRESS 7 STOWE ROAD
CITY-ST-ZIP MARY ESTHER FL 32569

TITLE NAME S CUNNINGHAM, KATHY SISTER ☐ Delete
STREET ADDRESS 15 MAYO STREET
CITY-ST-ZIP HURLBURT FIELD FL 32544

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME VP PARKER, DARIN ☒ Change ☐ Addition
STREET ADDRESS 505 KANUHA DRIVE
CITY-ST-ZIP FORT WALTON BEACH, FL 32547

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

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:

Kathy Cunningham
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10 May 04