

FILED

Jul 28, 2003 8:00 am
Secretary of State

07-14-2003 90166 006 ****61.25

01-21-2003 90196 026 ****61.25

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N02000008256

1. Entity Name

TABERNALE OF PRAISE CHURCH OF GOD IN CHRIST, IN
C.

Principal Place of Business

10 W. RACE TRACK ROAD
FORT WALTON BEACH FL 32547

Mailing Address

POST OFFICE BOX 1478
EGLIN AFB FL 32542-0478

55052506

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State

City & State

Fort Walton Beach

4. FEI Number

01-0587171

Applied For

Not Applicable

Zip

Country

Zip

Country

32547

USA

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

HICKS, HERMAN PASTOR
4234 MARYSA DRIVE
NICEVILLE FL 32578

Name

James N Cunningham

Street Address (P.O. Box Number is Not Acceptable)

15 Mayo Street

City

Hurlburt Field

FL

Zip Code

32544

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 appropriate if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

9 July 03

FILE NOW: FEE IS \$61.25
After September 10, 2003, min will be \$236.259. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to FeesMake Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	P	☒ Delete
NAME	HICKS, HERMAN	
STREET ADDRESS	4234 MARYSA DRIVE	
CITY-ST-ZIP	NICEVILLE FL 32578	
TITLE	V	☒ Delete
NAME	CUNNINGHAM, JAMES N ELDER	
STREET ADDRESS	15 MAYO STREET	
CITY-ST-ZIP	HURLBURT FIELD FL 32544	
TITLE	Treasurer	☐ Delete
NAME	POE, ARTIS M	
STREET ADDRESS	7 STOWE ROAD	
CITY-ST-ZIP	MARY ESTHER FL 32569	
TITLE	Secretary	☐ Delete
NAME	CUNNINGHAM, KATHY SISTER	
STREET ADDRESS	15 MAYO STREET	
CITY-ST-ZIP	HURLBURT FIELD FL 32544	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	President	☒ Change ☐ Addition
NAME	James N Cunningham	
STREET ADDRESS	15 Mayo Street	
CITY-ST-ZIP	Hurlburt Field FL 32544	
TITLE	Vice President	☒ Change ☐ Addition
NAME	GARY D. THOMAS	
STREET ADDRESS	101 HUMMINGBIRD AV. NW	
CITY-ST-ZIP	FT WALTON BEACH, FL 32548	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9 July 03

Date

850-581-3338

Daytime Phone #

CR20037 (4/03)