

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004611

FILED
May 05, 2010
Secretary of State

Entity Name: TABERNACLE BIBLE COLLEGE, INC.

Current Principal Place of Business:

735 W. LUMSDEN RD.
BRANDON, FL 33511

New Principal Place of Business:

Current Mailing Address:

PO BOX 89485
TAMPA, FL 33689

New Mailing Address:

FEI Number: 59-2582524 **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:

Name and Address of New Registered Agent:

LANGSTON, LAWRENCE DR.
3906 RYALWOOD CT
VALRICO, FL 33594 US

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: DP
Name: LANGSTON, LAWRENCE DR.
Address: P.O. BOX 89485
City-St-Zip: TAMPA, FL 33689

Title: DV
Name: LANGSTON, LANA DR.
Address: P.O. BOX 89485
City-St-Zip: TAMPA, FL 33689

Title: DS
Name: SUGGS, ROGER REV.
Address: 1712 FLOUNDER LN
City-St-Zip: PLANT CITY, FL 33567

Title: DT
Name: SMITH, DON DR.
Address: 4157 FAWN DR.
City-St-Zip: PLANT CITY, FL 33567

Title: DT
Name: JENKINS, ROBERT
Address: 3906 RYALWOOD CT.
City-St-Zip: VALRICO, FL 33596

Title: DIR.
Name: HINN, WILLIAM DR.
Address: 1906 SWAN DR.
City-St-Zip: IRVINE, CA 97016

I hereby 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 all other like empowered.

SIGNATURE: DR. LAWRENCE LANGSTON

PRES

05/05/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date