

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007555

FILED
May 02, 2006
Secretary of State

Entity Name: MIRACLE TABERNACLE FULL GOSPEL BAPTIST CHURCH INC

Current Principal Place of Business:

4777 SILVER STAR RD.
MAITLAND, FL 32751 US

New Principal Place of Business:

Current Mailing Address:

4777 SILVER STAR RD.
MAITLAND, FL 32751 US

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **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:

HARDEMAN, ALPHONZO
731 WINDGROVE TRAIL
MAITLAND, FL 32751 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: P () Delete
Name: HARDEMAN, ALPHONZO
Address: 731 WINDGROVE TRAIL
City-St-Zip: MAITLAND, FL 32751 US

Title: VP () Delete
Name: HARDEMAN, ALFERDOLL
Address: 3203 WALLER PLACE
City-St-Zip: ORLANDO, FL 32805 US

Title: S () Delete
Name: BEVILLE, ALBERT
Address: 731 WINDGROVE
City-St-Zip: MAITLAND, FL 32751 US

Title: T () Delete
Name: HARDEMAN, JUDY
Address: 731 WINDGROVE TRAIL
City-St-Zip: MAITLAND, FL 32751 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: ALPHONZO HARDEMAN

AGEN

05/02/2006

Electronic Signature of Signing Officer or Director

Date