

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010164

FILED
Apr 21, 2008
Secretary of State

Entity Name: FAITH BAPTIST TABERNACLE, INC.

Current Principal Place of Business:

17531 NORTHEAST HIGHWAY 27 ALTERNATE
WILLISTON, FL 32696

New Principal Place of Business:

Current Mailing Address:

P. O. DRAWER A
WILLISTON, FL 32696

New Mailing Address:

FEI Number: 59-1641339

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARDING, RICHARD
290 NE 140TH AVE.
WILLISTON, FL 32696 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: V () Delete
Name: STRINGER, MARK
Address: 17030 NE 29TH PLACE
City-St-Zip: WILLISTON, FL 32696

Title: S () Delete
Name: MORGAN, BRIAN
Address: 9616 NW 45TH AVE
City-St-Zip: OCALA, FL 34482

Title: P () Delete
Name: HARDING, RICHARD
Address: 206 N.E. 1ST STREET
City-St-Zip: WILLISTON, FL 32696

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:

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: RICHARD A. HARDING

MR.

04/21/2008

Electronic Signature of Signing Officer or Director

Date