## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000003865

FILED Jan 15, 2008 Secretary of State

Entity Name: TABERNACULO PENTECOSTAL DE TAMPA, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	NUGUSTINE AN FL 33617	/E.			
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
	NUGUSTINE AN FL 33617	/E.			
El Number	r: 65-1248233	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	d Address of (	Current Registered Agent:	Name and Address	of New Registered Agent:	
119 ST. A	O, DAVID J. NUGUSTINE AN FL 33617 U	_			
	e named entity te of Florida.	submits this statement for the p	ourpose of changing its register	ed office or registered agent, or both,	
SIGNATU	JRE:				
	Electro	nic Signature of Registered Age	ent	Date	
SEELOED	S AND DIREC	TOPS:	ADDITIONS/CHANG	SEC TO OFFICERS AND DIRECTOR	
JEFICER	S AND DIKE	TORO.	ADDITIONS/CHAIN	SES TO OFFICERS AND DIRECTORS	
itle: lame: \ddress:	DP ( CANTILLO, DA 419 ST. AUGU	) Delete VID J. STINE AVE.	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
ritle: lame: .ddress: .city-St-Zip: ritle: lame: .ddress:	DP ( CANTILLO, DA 419 ST. AUGU TAMPA, FL 33  DST ( CANTILLO, JU 419 ST. AUGU	) Delete IVID J. STINE AVE. 8617 ) Delete LISSA E. STINE AVE.	Title: Name: Address:		
itle: lame: lddress: city-St-Zip: lame: lddress: city-St-Zip: lddress: city-St-Zip: lame: lddress: city-St-Zip:	DP ( CANTILLO, DA 419 ST. AUGU TAMPA, FL 33  DST ( CANTILLO, JU 419 ST. AUGU TAMPA, FL 33  D ( PAZ, JULIO 119 E. 119TH.	) Delete AVID J. STINE AVE. 8617  ) Delete LISSA E. STINE AVE. 8617  ) Delete AVE.	Title: Name: Address: City-St-Zip: Title: Name: Address:	( ) Change ( ) Addition	
itle: lame: .ddress: city-St-Zip: itle: lame: .ddress: city-St-Zip: itle: lame: .ddress:	DP ( CANTILLO, DA 419 ST. AUGU TAMPA, FL 33  DST ( CANTILLO, JU 419 ST. AUGU TAMPA, FL 33  D ( PAZ, JULIO 119 E. 119TH. TAMPA, FL 33	) Delete (VID J. STINE AVE. 3617  ) Delete LISSA E. STINE AVE. 3617  ) Delete AVE. 3612  ) Delete ES A. IILL PLACE	Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	( ) Change ( ) Addition ( ) Change ( ) Addition	

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: DAVID J. CANTILLO DP 01/15/2008