


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

07-30-2007 90062 022 ****70.00

DOCUMENT # N06000001738

1. Entity Name
EVANGELICAL TABERNACLE OF PRAISE, INC.



FILED

07 AUG 20 AM 10:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
1044 NORTH WALKER AVENUE
LAKELAND, FL 33805

Mailing Address
PO BOX 9153
TAMPA, FL 33674



2. Principal Place of Business - No P.O. Box #
417 N. Massachusetts Ave 1844 Farrington Dr.
Suite, Apt. #, etc.

3. Mailing Address
1844 Farrington Dr.
Suite, Apt. #, etc.

07062007 Chg-NP CR2E037 (12/06)

City & State
Lakeland, FL

City & State
Lakeland, FL

Zip
33801

Country
U.S.

Zip
33809

Country
U.S.

4. FEL Number

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145

7. Name and Address of New Registered Agent
Name: Gertrude Pierre
Street Address (P.O. Box Number is Not Acceptable): 1844 Farrington Dr.
City: Lakeland FL Zip Code: 33809

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: *Gertrude Pierre* DATE: 7/23/07

(NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by September 14, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PIERRE, BENISSE 1044 NORTH WALKER AVENUE LAKELAND, FL 33805	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Rose Volmy 1403 Keller Ave Apt #205 Lakeland, FL 33805 (Treasurer)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD PIERRE, GERTRUDE 1044 NORTH WALKER AVENUE LAKELAND, FL 33805	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CADET, MARK 1044 NORTH WALKER AVENUE LAKELAND, FL 33805	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Odeline L Norrette 1844 Farrington Dr. Lakeland, FL 33809
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Benisse Pierre* DATE: 7/23/07 (863) 816-3577

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Document corrected per Gertrude Pierre.