2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004743

Entity Name: TALBOT CHAPEL AME ZION CHURCH, INC.

FILED May 22, 2009 Secretary of State

•	···,			
Current P	rincipal Place of Business:	New Princ	New Principal Place of Business:	
425 N REL PENSACC	JS ST DLA, FL 32501			
Current Mailing Address:		New Maili	New Mailing Address:	
P O BOX 448 PENSACOLA, FL 32591			425 N REUS ST PENSACOLA, FL 32501	
	: 59-0371490 FEI Number Applied For () ce with s. 607.193(2)(b), F.S., the corporation did not	-	e.	
Name and	Address of Current Registered Agent:	Name and	Address of New Registered Agent:	
BASS, NA 1440 GER PENSACC				
	named entity submits this statement for the pue of Florida.	rpose of changing i	ts registered office or registered agent, or both,	
SIGNATUR	RE:			
	Electronic Signature of Registered Ager	nt	 Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () Delete JACOBS, LESTER A 421 N REUS ST PENSACOLA, FL 32501	Title: Name: Address: City-St-Zip:	P (X) Change () Addition BASS, NATHAN 421 N REUS ST PENSACOLA, FL 32501	
Title: Name: Address: City-St-Zip:	VP () Delete BASS, NATHAN 1440 GERMAIN ST PENSACOLA, FL 32534	Title: Name: Address: City-St-Zip:	VP (X) Change () Addition JONES, HORACE 3515 SCENIC HWY PENSACOLA, FL 32504	
Title: Name: Address: City-St-Zip:	VP () Delete JONES, HORACE 3515 SCENIC HWY PENSACOLA, FL 32504	Title: Name: Address: City-St-Zip:	S (X) Change () Addition LONGMIRE, MAGGIE 3241 TORRES AVENUE PENSACOLA, FL 32503	
Title: Name: Address: City-St-Zip:	S () Delete LONGMIRE, MAGGIE 3241 TORRES AVE PENSACOLA, FL 32503	Title: Name: Address: City-St-Zip:	T (X) Change () Addition MCGEACHY, ANNIE 4412 COPPERWOOD PL PACE, FL 32571	
Title: Name:	T (X) Delete MCGEACHY, ANNIE	Title: Name:	() 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.

Address:

City-St-Zip:

SIGNATURE: NATHAN BASS P 05/22/2009

4412 COPPERWOOD PL

PACE, FL 32571

Address: City-St-Zip: