

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004870

FILED
Apr 07, 2009
Secretary of State

Entity Name: RAPTURE TABERNACLE, INC.

Current Principal Place of Business:

10920 SW 198TH TERRACE
DUNELLON, FL 34432

New Principal Place of Business:

Current Mailing Address:

6760 SW 138TH TERRACE
OCALA, FL 34481 US

New Mailing Address:

FEI Number: 80-0077424

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUCKER, MILLARD PASTOR
6760 SW 138TH TERRACE
OCALA, FL 34481 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: RUCKER, MILLARD
Address: 6760 SW 138TH TERRACE
City-St-Zip: OCALA, FL 34481

Title: P () Delete
Name: RUCKER, KATHY
Address: 6760 SW 138TH TERRACE
City-St-Zip: OCALA, FL 34481

Title: S () Delete
Name: DOZIER, CRYSTAL
Address: 5891 NW 62ND AVE
City-St-Zip: OCALA, FL 34482

Title: T () Delete
Name: SHOCKLEY, JANICE
Address: 1350 NE 37TH LANE
City-St-Zip: OCALA, FL 34479

Title: T () Delete
Name: SHOCKLEY, OLIVER
Address: 1350 NE 37TH LANE
City-St-Zip: OCALA, FL 34479

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:

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: KATHY RUCKER

VP

04/07/2009

Electronic Signature of Signing Officer or Director

Date