

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008340

FILED  
Mar 30, 2009  
Secretary of State

Entity Name: EVANGELISTS FOR JESUS TABERNACLE, INC.

**Current Principal Place of Business:**

15108 M.L. KING JR. BLVD.  
DOVER, FL 33527

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 954  
PLANT CITY, FL 33564

**New Mailing Address:**

FEI Number: 20-8145124

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SANDS, WILLIAM G.  
15108 M.L. KING JR. BLVD.  
DOVER, FL 33527 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: DP ( ) Delete  
Name: SANDS, WILLIAM G.  
Address: P.O. BOX 954  
City-St-Zip: PLANT CITY, FL 33564

Title: DST ( ) Delete  
Name: SANDS, LOVE J.  
Address: P.O. BOX 954  
City-St-Zip: PLANT CITY, FL 33564

Title: DV ( ) Delete  
Name: SANDS, GEORGE W.  
Address: 4459 LOTT AVE.  
City-St-Zip: PLANT CITY, FL 33567

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DT (X) Change ( ) Addition  
Name: SANDS, LOVE J.  
Address: P.O. BOX 954  
City-St-Zip: PLANT CITY, FL 33564

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DS ( ) Change (X) Addition  
Name: PEEK, MARGUERITE L  
Address: 14604 FRANKLIN AVE.  
City-St-Zip: DOVER, FL 33527

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: MARGUERITE PEEK

DS

03/30/2009

Electronic Signature of Signing Officer or Director

Date