

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012516

FILED  
Mar 14, 2009  
Secretary of State

Entity Name: FAITH TABERNACLE CHURCH INC.

**Current Principal Place of Business:**

502 MARTIN LUTHER KING DR  
BALDWIN, FL 32234

**New Principal Place of Business:**

**Current Mailing Address:**

502 MARTIN LUTHER KING DR  
BALDWIN, FL 32234

**New Mailing Address:**

FEI Number: 20-4001635      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

WILSON, CHARLES E SR.  
502 MARTIN LUTHER KING DR  
BALDWIN, FL 32234 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: CEO ( ) Delete  
Name: WILSON, SR., CHARLES E PASTOR  
Address: PO BLX 697  
City-St-Zip: BALDWIN, FL 32234

Title: T ( ) Delete  
Name: WILSON, NATALIE G BM  
Address: 160 MARTIN LUTHER KING DR  
City-St-Zip: BALDWIN, FL 32234

Title: T ( ) Delete  
Name: BOYKINS, BEULAH B BM  
Address: PO BOX 23  
City-St-Zip: BALDWIN, FL 32234

Title: T ( ) Delete  
Name: SURRENCY, THEODORE BM  
Address: 212 SOUTH BLVD WEST  
City-St-Zip: MACCLENNY, FL 32063

**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:

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: CHARLES E. WILSON SR.

CEO

03/14/2009

Electronic Signature of Signing Officer or Director

Date