2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000004755

Entity Name: TABERNACLE OF FIRE INC

FILED Jan 16, 2009 Secretary of State

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Current P	rincipal Place	e of Business:	New Prince	New Principal Place of Business:		
1870 NE CHURCH ST JENSEN BEACH, 34957			1870 NE CHURCH ST JENSEN BEACH, FL 34957			
Current Mailing Address:			New Mailing Address:			
	CHURCH ST BEACH, FL 34	1957				
FEI Number	: 26-2626490	FEI Number Applied For()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()	
Name and	d Address of (Current Registered Agent:	Name and	Address of	New Registered Agent:	
1870 NE C JENSEN E	ERG, GARY G CHURCH ST BEACH, FL 34		ournose of changing i	ts registered	office or registered agent, or both,	
	e of Florida.	submits this statement for the p	ourpose or changing i	is registered	office of registered agent, or both,	
SIGNATU	RE:					
	Electro	nic Signature of Registered Age	ent		Date	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	P (LANDSBERG, 1870 NE CHUP JENSEN BEAC	RCH ST	Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	VP (LANDSBERG, 1870 NE CHUF JENSEN BEAC	RCH ST	Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	VP (LANDSBERG, 1870 NE CHUF JENSEN BEAC	RCH ST	Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	COPPOLA, RI 2057 SW LEA		
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: Citv-St-Zip:	COPPOLA, CI 2057 SW LEA		

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: GARY G. LANDSBERG P 01/16/2009