

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000005972

FILED
Apr 30, 2009
Secretary of State

Entity Name: TABERNACLE OF HOPE WORSHIP CENTER, INC.

Current Principal Place of Business:

515 DOMARIS AVENUE
LAKE WALES, FL 33853 US

New Principal Place of Business:

Current Mailing Address:

515 DOMARIS AVENUE
LAKE WALES, FL 33853 US

New Mailing Address:

FEI Number: 30-0406826

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HALL, FRANTERIA
515 DOMARIS AVENUE
LAKE WALES, FL 33853 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: HALL, MURRAY III
Address: 515 DOMARIS AVENUE
City-St-Zip: LAKE WALES, FL 338523 US

Title: VP () Delete
Name: HALL, FRANTERIA
Address: 515 DOMARIS AVENUE
City-St-Zip: LAKE WALES, FL 33853 US

Title: SEC () Delete
Name: JONES, ANNIE
Address: 9116 REGENTS PARK DRIVE
City-St-Zip: TAMPA, FL 33647 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HALL, MURRAY III
Address: 9116 REGENTS PARK DRIVE
City-St-Zip: TAMPA, FL 33647 US

Title: VP (X) Change () Addition
Name: HALL, FRANTERIA
Address: 9116 REGENTS PARK DRIVE
City-St-Zip: TAMPA, FL 33647 US

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: MURRAY HALL

P.

04/30/2009

Electronic Signature of Signing Officer or Director

Date