

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000010851

FILED
Apr 29, 2011
Secretary of State

Entity Name: TABERNACLE OF PRAISE CHRISTIAN CENTER, INC.

Current Principal Place of Business:

995 BATES RD.
HAINES CITY, FL 33844

New Principal Place of Business:

7000 STATE RD 544 W
SUITE 1
WINTER HAVEN, FL 33881 US

Current Mailing Address:

995 BATES RD.
HAINES CITY, FL 33844

New Mailing Address:

FEI Number: 80-0483915 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ANGLIN, MARYE T
995 BATES RD
HAINES CITY, FL 33844 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: PRES
Name: ANGLIN, JONATHAN SR.
Address: 995 BATES RD.
City-St-Zip: HAINES CITY, FL 33844 US

Title: VP
Name: ANGLIN, MARYE T
Address: 995 BATES RD.
City-St-Zip: HAINES CITY, FL 33844 US

Title: SECR
Name: STREETER, KAREN D
Address: 609 NORTH 4TH STREET
City-St-Zip: HAINES CITY, FL 33844 US

Title: TRES
Name: ANGLIN, QUALONDA Q
Address: 133 WINCHESTER LANE
City-St-Zip: HAINES CITY, FL 33844 US

Title: AVP
Name: ANGLIN, JONATHAN JR.
Address: 133 WINCHESTER LANE
City-St-Zip: HAINES CITY, FL 33844 US

I hereby 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 all other like empowered.

SIGNATURE: MARYE ANGLIN

VP

04/29/2011

Electronic Signature of Signing Officer or Director

Date