2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 26, 2004
Secretary of State

DOCUMENT# N16873

Entity Name: CHURCH OF GOD AND SAINTS OF CHRIST, TABERNACLE #TEN, MIAMI, FLA., INC.

Current Principal Place of Business:

2012 NW 76 STREET
MIAMI, FL 33147

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 381293
MIAMI, FL 33238

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

EAVES, SAMUEL JOSEPH, SR.
3401 STUART STREET
JACKSONVILLE, FL 32209 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: D ( ) Delete
Name: ROBINSON, MARIVA
Address: 8984 NW 21ST STREET
City-St-Zip: HOLLYWOOD, FL 33024

Title: T ( ) Delete
Name: WHITE, JUANITA
Address: 3155 NW 48TH TERRACE
City-St-Zip: MIAMI, FL 33127

Title: T ( ) Delete
Name: STEPHENS, FLORA
Address: 536 NW 49TH STREET
City-St-Zip: MIAMI, FL 33127

Title: D ( ) Delete
Name: QUATTLEBAUM, LOUISE
Address: 11211 S. MILITARY TR. #3923
City-St-Zip: BOYNTON BEACH, FL 33436

Title: D ( ) Delete
Name: EAVES, ELDER SAMUEL III
Address: 7863 BUSHNELL AVE
City-St-Zip: NORTH PORT, FL 34286

Title: D ( ) Delete
Name: TOOMBS, ANTHONY
Address: 310 NE 176 STREET
City-St-Zip: MIAMI, FL 33162

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:

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 for the exemption stated in Section 119.07(3)(i), 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: ANTHONY TOOMBS MR 06/26/2004
Electronic Signature of Signing Officer or Director — Date