

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17026

FILED  
Feb 18, 2009  
Secretary of State

**Entity Name:** LIFE TABERNACLE OF THE APOSTOLIC FAITH, INC.

**Current Principal Place of Business:**

6573 HYDE GROVE AVE  
JACKSONVILLE, FL 32210

**New Principal Place of Business:**

**Current Mailing Address:**

6573 HYDE GROVE AVE  
JACKSONVILLE, FL 32210

**New Mailing Address:**

**FEI Number:** 59-2779197

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DEAN, JERRY F  
5386 POPPY DR  
JACKSONVILLE, FL 32205 US

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

DEAN, JERRY F  
1869 MEMORY LN.  
JACKSONVILLE, FL 32210 US

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: REV. JERRY F. DEAN

02/18/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: LOGSTON, DIANNE  
Address: 6318 TREE TOP CIR W  
City-St-Zip: JACKSONVILLE, FL 32244

Title: D ( ) Delete  
Name: MUNDAY, LINDA  
Address: 1310 CLAYTON RD  
City-St-Zip: JACKSONVILLE, FL

Title: D ( ) Delete  
Name: DEAN, JERRY F PASTOR  
Address: 5386 POPPY DR.  
City-St-Zip: JACKSONVILLE, FL 32205

Title: D ( ) Delete  
Name: O'QUINN, JOY  
Address: 7827 SYRAMOUR ST  
City-St-Zip: JACKSONVILLE, FL 32219

Title: D ( ) Delete  
Name: TOUCHTON, DALE  
Address: 6773 HANSON DR NORTH  
City-St-Zip: JACKSONVILLE, FL 32210

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: DEAN, JERRY F PASTOR  
Address: 1869 MEMORY LN.  
City-St-Zip: JACKSONVILLE, FL 32210

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: LOGSTON, JAMES E  
Address: 11758 CARSON LAKE DRIVE WEST  
City-St-Zip: JACKSONVILLE, FL 32221

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: REV. JERRY F. DEAN

PAST

02/18/2009

Electronic Signature of Signing Officer or Director

Date