2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38257

ST. AUGUSTINE, FL 32095

FILED Jul 02, 2009 Secretary of State

Entity Name: TABERNACLE MISSIONARY BAPTIST CHURCH OF ST. AUGUSTINE, INC.

Current Principal Place of Business: New Principal Place of Business:

280 DUVAL ST

280 DUVAL ST ST. AUGUSTINE, FL 32084 US

Current Mailing Address: New Mailing Address:

PO BOX 3683

SAINT AUGUSTINE, FL 32085 US

FEI Number: 59-3008280 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

MCDOWELL, MARILYN J 836 W 2ND ST

SAINT AUGUSTINE, FL 32084 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D
 () Delete
 Title:
 D
 (X) Change () Addition

 Name:
 WILLIAMS, SHARON W.
 Name:
 WILLIAMS, SHARON W.

 Address:
 816 W. SECOND STREET
 Address:
 816 W. SECOND STREET

 City-St-Zip:
 ST. AUGUSTINE, FL
 32084 US

Title: C () Delete Title: C (X) Change () Addition Name: MOORE, JOHNNY L Name: MOORE, JOHNNY L

Address: 943 BUTLER AVE. Address: 943 BUTLER AVE.

City-St-Zip: ST. AUGUSTINE, FL 32084 US

 Title:
 S
 () Delete
 Title:
 S
 (X) Change () Addition

 Name:
 MCDOWELL, MARILYN
 Name:
 MCDOWELL, MARILYN J

 Address:
 836 W. 2ND STREET
 Address:
 836 W. 2ND STREET

City-St-Zip: SAINT AUGUSTINE, FL 32084 City-St-Zip: SAINT AUGUSTINE, FL 32084 US

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf D} \qquad {\sf (X) Change () Addition}$

 Name:
 CROOMS, JAMES
 Name:
 CROOMS, JAMES

 Address:
 PO BOX 5026
 Address:
 PO BOX 5026

City-St-Zip: SAINT AUGUSTINE, FL 32085 City-St-Zip: SAINT AUGUSTINE, FL 32085 US

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: MARILYN J. MCDOWELL S 07/02/2009