## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N4690

(7)

1. Corporation Name					
TABERNACLE OF PRAISE, INC.					
MADERINAULE OF FRAIDE, INC.				HANDING SIGNIGUS SIGNIS SING SUBSI SUBSI SUBSI SUBSI SING SUBSI SUBSI SUBSI SUBSI SUBSI SUBSI SUBSI SUBSI SUBSI	
Principal Place of Business Mailing Address				1007  B1 B11 01010 01110 10111 0070)   1101 61017 01011 01011 01611 01611 01611 01611 01611 01611 01611 01611	
350 N. JOG RD. 350 N. JOG RD.				3. Date Incorporated or Qualified	
WEST PALM BEACH FL 33413 WEST PALM BEACH FL 33413					01/21/1992
US US				4. FEI Number Applied For	
ŀ					65-0302422 Not Applicable
2. Principal Place of Business 2a. Mailing Address					#9.7E Additional
21 350 N, Jog Kd. 26					5. Certificate of Status Desired
Suite, Apt. #, etc Suite, Apt. #, etc.					6. Election Campaign Financing \$5.00 May Be
22 27					Trust Fund Contribution
City & State City & State City & State 28					7. Is this nonprofit corporation a homeowners association?
Zip	Soyintry Q	Zip	Country	/	8. This corporation owes or has paid the current year Intangible
24 334	13 25 Tom Deach	0.00	30		Personal Property Tax due June 30. Yes No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered Agent
			81	Name	
WILLIAMS, RICKY G.			82	Street Ac	ddress (P.O. Box Number is Not Acceptable)
350 N JOG RD			_		
WEST PA	ALM BEACH FL 33413		83		
			84	City	FL 85 Zip Code
11 Byrought	to the provisions of Captions 617 0502	and 617 1508 Florida Statute	the above	e-named co	
office or r	egistered agent, or both, in the State of	of Florida. Such change was a	ithorized b	y the corpo	orporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered
agent. I a	m familiar with, and accept the obligat	ions of, Section 617.0503, Flor	ida Statute	s.	
SIGNATURE _	Signature, typed or printed name of registered agen	and title if applicable. (NOTE:	Registered Ag	ent signature re	quired when reinstating) DATE
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DP	☐ DELETE	1,1 TITLE		☐ Change ☐ Addition
NAME	WILLIAMS, RICKY G		1.2 NAME		
STREET ADDRESS			1.3 STREE	T ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL		1.4 CITY-5	ST-ZIP	
TITLE	DST	☐ DELETE	2.1 TITLE		Change L Addition
NAME	Williams, Brenda L		2.2 NAME		
STREET ADDRESS	11 100 PD		2.3 STREE	T ADDRESS	
CITY - ST - ZIP			2, 4 CITY-	ST-ZIP	
TITLE	D	☐ DELETE	3.1 TITLE		Change Addition
NAME	UPTHEGROVE, PANSY R.		3.2 NAME		
STREET ADDRESS	300 N. JOG RD.		1	T ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL	Claner	3.4. CITY-	ST-ZIP	Change Addition
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME	i i	
STREET ADDRESS			T ADDRESS		
CITY-ST-ZIP			4.4 CITY -	SI - ZIP	☐ Change ☐ Addition
TITLE	-		5.1 TITLE 5.2 NAME		
1					
			T ADDRESS		
DEL EXE			5.4 CITY -: 6.1 TITLE	31 "ZIF"	☐ Change ☐ Addition
TITLE			527 11766		— • —
NAME			6.2 NAME	Į.	

• I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; 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 in Block 12 or Block 13 of chapter 6.17, Florida Statutes.

IGNATURE Rich Dellar FRESH Williams

8 689-4517

**FILED** 

Jan 20 1998 8:00am

Secretary of State

CR2E037 (10/97)