

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47401

FILED  
Apr 14, 2009  
Secretary of State

**Entity Name:** TRUTH TABERNACLE OF APOPKA, INC.

**Current Principal Place of Business:**

8125 GILLIAM RD  
APOPKA, FL 32703

**New Principal Place of Business:**

**Current Mailing Address:**

8125 GILLIAM RD  
APOPKA, FL 32703 US

**New Mailing Address:**

**FEI Number:** 59-2470446

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROWLEY, JOE A  
8007 STONE ROAD  
APOPKA, FL 32703 US

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

ROWLEY, JOE A  
7220 JUNE BUG LANE  
ORLANDO, FL 32818 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:

04/14/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: ROWLEY, JOE A  
Address: 8007 STONE RD.  
City-St-Zip: APOPKA, FL 32703

Title: VPD ( ) Delete  
Name: BASS, THOMAS W  
Address: 3205 NE 49TH ST.  
City-St-Zip: OCALA, FL 34479

Title: D ( ) Delete  
Name: ROWELL, SAMUEL  
Address: 5124 TIMBER RIDGE TR.  
City-St-Zip: OCOEE, FL 34761

Title: D ( ) Delete  
Name: WHITED, DANIEL  
Address: 6150 ALLEN ST.  
City-St-Zip: MOUNT DORA, FL 32757

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

Title: PD (X) Change ( ) Addition  
Name: ROWLEY, JOE A  
Address: 7220 JUNE BUG LANE  
City-St-Zip: ORLANDO, FL 32818

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 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: JOE A. ROWLEY

PD

04/14/2009

Electronic Signature of Signing Officer or Director

Date