

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # N48868**

1. Entity Name

THE TABERNACLE OF THE HIGHER POWER, INC.**FILED**
May 21, 2001 8:00 am
Secretary of State

05-21-2001 90370 007 ****61.25

0087106

Principal Place of Business

Mailing Address

433 SOUTH MAIN STREET
LAKE PLACID FL 33852
USP.O. BOX 3300
LAKE PLACID FL 33852
US

2. Principal Place of Business

3. Mailing Address

901 South Delaney Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

City & State

Avon Park FL

Zip

Country

Zip

Country

33825

Highland

4. FEI Number

59-3124651

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RANDOLPH, NATHANIEL
603 WILSON AVE NE
LAKE PLACID FL 33852

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.259. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees**Make Check Payable to**
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ DeleteNAME
STREET ADDRESS
CITY-ST-ZIP
P
RANDOLPH, NATHANIEL
603 WILSON AVENUE N E
LAKE PLACID FL 33852TITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ DeleteNAME
STREET ADDRESS
CITY-ST-ZIP
VPD
RANDOLPH, ANGELA
603 WILSON AVENUE N E
LAKE PLACID FL 33852TITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ DeleteNAME
STREET ADDRESS
CITY-ST-ZIP
D
CARPENTER, MARY JEAN
J-08 STAFFORD DR
LAKE PLACID FL 33852TITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ DeleteNAME
STREET ADDRESS
CITY-ST-ZIP
T
NEAL, SOPHIA J
603 WILSON AVE N
LAKE PLACID FL 33852TITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ DeleteNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ DeleteNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Nathaniel Randolph
5/19/01 863-835-0133

CR2E037 (10/00)