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May 05 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT **1997**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N94000000335 (9)

1. Corporation Name

FAITH TABERNACLE CHURCH, INC.

Principal Place of Business	Mailing Address
2740 N. GALLOWAY ROAD LAKELAND FL 33809-0611	2740 N. GALLOWAY ROAD LAKELAND FL 33810-0611

3. Date Incorporated or Qualified: 01/25/1994
3a. Date of Last Report: 03/26/1996

2. Principal Place of Business — 21:
Suite, Apt. #, etc. — 22:
City & State — 23:
Zip — 24: Country — 25:

2a. Mailing Address — 26:
Suite, Apt. #, etc. — 27:
City & State — 28:
Zip — 29: Country — 30:

4. FEI Number: NOT APPLICABLE ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent

CABLE, MILDRED L REV.
854 NORTH EDITH AVE.
LAKELAND FL 33801

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	ACP	☑ DELETE	1.1 TITLE	T- ACP	☐ Change ☑ Addition
NAME	MIZELL, ANN		1.2 NAME	Susan Taylor	
STREET ADDRESS	1915 OAKHILL STREET		1.3 STREET ADDRESS	1816 Unitah Ave APT#4	
CITY-ST-ZIP	LAKELAND FL 33801		1.4 CITY-ST-ZIP	Lakeland, Fl 33803	
TITLE	D	☑ DELETE	2.1 TITLE	T- Vice President	☐ Change ☑ Addition
NAME	MIZELL, LEO		2.2 NAME	Martha L. Bozeman	
STREET ADDRESS	1915 OAKHILL STREET		2.3 STREET ADDRESS	850 N. Edith Ave	
CITY-ST-ZIP	LAKELAND FL 33801		2.4 CITY-ST-ZIP	Lakeland, Fl 33815	
TITLE	DCT	☑ DELETE	3.1 TITLE	T- Secretary	☐ Change ☑ Addition
NAME	CARINODY, RODGER		3.2 NAME	Jackie McMullen	
STREET ADDRESS	2640 MCGREGOR STREET		3.3 STREET ADDRESS	1576 Churchhill Court	
CITY-ST-ZIP	LAKELAND FL 33801		3.4 CITY-ST-ZIP	Lakeland, Fl 33801	
TITLE		☐ DELETE	4.1 TITLE	T- Trustee	☐ Change ☑ Addition
NAME			4.2 NAME	Richard McMullen	
STREET ADDRESS			4.3 STREET ADDRESS	1576 Churchhill Court	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	Lakeland, Fl 33801	
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (9/96)

14. I do 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Martha L. Bozeman Martha L. Bozeman 3-19-97 Gill Ltr 5553