2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004657

Apr 12, 2006 Secretary of State

Entity Name: TABERNACLE CHRISTIAN UNIVERSITY, INC.

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

163 W. 20TH ST.

RIVIERA BEACH, FL 33404

Current Mailing Address: New Mailing Address:

P.O. BOX 10201

RIVIERA BEACH, FL 33419

FEI Number: 65-0582232 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

MOSES, JEROME R II
WILLIAMS, HAYWOOD N DIRECTO
10821 NORTH MILITARY TRAIL

RIVIERA BEACH, FL 33404 US 21D PAL BEACH GARDENS, FL 33410 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: HAYWOOD N. WILLIAMS 04/12/2006

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, HAYWOOD N
 Name:
 WILLIAMS, HAYWOOD N D/VICE

 Address:
 142 E. 23RD ST.
 Address:
 10821 NORTH MILITARY TRAIL

 City-St-Zip:
 RIVIERA BEACH, FL 33404
 City-St-Zip:
 PALM BEACH GARDENS, FL 33410

Title: ADM () Delete Title: (X) Change () Addition STEWART, NADIA Name: MOSES II, JEROME R S/DEAN Name: Address: 3651 SAN CASTLE BLVD. Address: 521 WEST 25TH STREET City-St-Zip: LANTANA, FL 33462 City-St-Zip: RIVIERA BEACH, FL 33404

Title: D () Delete Title: D (X) Change () Addition Name: MOSES, JEROME R II Name: PRICE, MARY G T/DIREC

Address: 521 W 25TH ST Address: 1711 AVENUE F

City-St-Zip: RIVIERA BEACH, FL 33404 City-St-Zip: RIVIERA BEACH, FL 33404

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

 Name:
 PRICE, MARY
 Name:

 Address:
 1711 AVENUE F
 Address:

 City-St-Zip:
 RIVIERA BEACH, FL 33404
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: HAYWOOD N. WILLIAMS D 04/12/2006