

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000006294

FILED
Jan 12, 2009
Secretary of State

Entity Name: TABERNACLE OF PRAYER AND DELIVERANCE, INC. OF MANATEE CO.

Current Principal Place of Business:

3301 14TH STREET WEST
BRADENTON, FL 34205

New Principal Place of Business:

414 A 7TH STREET WEST
PALMETTO, FL 34221 US

Current Mailing Address:

3301 14TH STREET WEST
BRADENTON, FL 34205

New Mailing Address:

414 A 7TH STREET WEST
PALMETTO, FL 34221 US

FEI Number: 65-0571635

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MOBLEY, ROSE V PSTR
1018 5TH STREET WEST
BRADENTON, FL 34205 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MOBLEY, ROSE V PASTOR
Address: 1018 5TH STREET WEST
City-St-Zip: BRADENTON, FL 34205 US

Title: V () Delete
Name: JONES, JOHNNY ASST. P
Address: 2202 28TH ST CT W
City-St-Zip: PALMETTO, FL 34221 US

Title: S () Delete
Name: MORLEY, MARGARET
Address: 2139 6TH STREET
City-St-Zip: SARASOTA, FL 34237 US

Title: T () Delete
Name: BLACK, CLARA
Address: 3301 14TH ST WEST
City-St-Zip: BRADENTON, FL 34205 US

Title: A () Delete
Name: MILLER, BRENDA
Address: 4275 COQUINA CIRCLE, APT. C
City-St-Zip: BRADENTON, FL 34208 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: BLACK, CLARA
Address: 414 A 7TH ST WEST
City-St-Zip: PALMETTO, FL 34221 US

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: CLARA BLACK

ADM

01/12/2009

Electronic Signature of Signing Officer or Director

Date