

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004833

FILED
Apr 17, 2006
Secretary of State

Entity Name: TABERNACLE MINISTRIES, INC.

Current Principal Place of Business:

1201 LITHIA ROAD
BRANDON, FL 33511 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 89485
TAMPA, FL., FL 33689 US

New Mailing Address:

FEI Number: 59-2252608

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LANGSTON, FLOYD JR.
P.O. BOX 89485
TAMPA, FL 33689 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: PD () Delete
Name: LANGSTON, FLOYD
Address: P.O. BOX 89485
City-St-Zip: TAMPA, FL 33689

Title: VD () Delete
Name: LANGSTON, LARRY JR.
Address: 1971 W LUNGDEN ROAD #302
City-St-Zip: BRANDON, FL 33511

Title: SD () Delete
Name: LANGSTON, LANA
Address: P.O. BOX 89485
City-St-Zip: TAMPA, FL 33689

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:

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: FLOYD LANGSTON

DP

04/17/2006

Electronic Signature of Signing Officer or Director

Date