

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005958

FILED  
Apr 20, 2009  
Secretary of State

Entity Name: TABERNACLE OF ZION, INC.

## Current Principal Place of Business:

928 W FAITH CIRCLE  
BRADENTON, FL 33508 US

## New Principal Place of Business:

928 W FAITH CIRCLE  
BRADENTON, FL 34208 US

## Current Mailing Address:

P.O. BOX 1541  
BRADENTON, FL 342061541 US

## New Mailing Address:

P.O. BOX 1541  
BRADENTON, FL 342061541 US

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

AUERBACH, EFROCINE  
928 W FAITH CIRCLE  
BRADENTON, FL 33508 US

## Name and Address of New Registered Agent:

AUERBACH, EFROCINE  
928 W FAITH CIRCLE  
BRADENTON, FL 34208 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: EFROCINE AUERBACH

04/20/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: AUERBACH, ISRAEL  
Address: 928 W FAITH CIRCLE  
City-St-Zip: BRADENTON, FL 33508

Title: VPD ( ) Delete  
Name: AUERBACH, EFROCINE  
Address: 928 W FAITH CIRCLE  
City-St-Zip: BRADENTON, FL 33508

Title: STD ( ) Delete  
Name: FIOTES, CHRISTOPHER P III  
Address: 928 W FAITH CIRCLE  
City-St-Zip: BRADENTON, FL 33508

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: AUERBACH, ISRAEL  
Address: 928 W FAITH CIRCLE  
City-St-Zip: BRADENTON, FL 33508

Title: VPD (X) Change ( ) Addition  
Name: AUERBACH, EFROCINE  
Address: 928 W FAITH CIRCLE  
City-St-Zip: BRADENTON, FL 33508

Title: STD (X) Change ( ) Addition  
Name: FIOTES, CHRISTOPHER P III  
Address: 928 W FAITH CIRCLE  
City-St-Zip: BRADENTON, FL 34208

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: EFROCINE AUERBACH

PD

04/20/2009

Electronic Signature of Signing Officer or Director

Date