

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001965

FILED
Aug 28, 2009
Secretary of State

Entity Name: TAMPA GOSPEL HALL, INC.

Current Principal Place of Business:

407 E CLUSTER AVE
TAMPA, FL 33604

New Principal Place of Business:

407 E. CLUSTER AVE
TAMPA, FL 33604

Current Mailing Address:

% DAVID J. MOREL
38603 YOUNG DR
ZEPHYRHILLS, FL 335403045

New Mailing Address:

38603 YOUNG DR.
ZEPHYRHILLS, FL 335403045

FEI Number: 59-3481003 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MOREL, DAVID J
38603 YOUNG DR
ZEPHYRHILLS, FL 335403045 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: MOREL, DAVID J
Address: 38603 YOUNG DR
City-St-Zip: ZEPHYRHILLS, FL 33540

Title: SD () Delete
Name: CHISOLM, CHRISTOPHER
Address: 2307 WALNUT ST
City-St-Zip: TAMPA, FL 33612

Title: VD () Delete
Name: WEIR, ALONZA G
Address: 9432 PACES FERRY DRIVE
City-St-Zip: TAMPA, FL 33615

Title: TD () Delete
Name: CANNON, JOSEPH F II
Address: 2530 LINCOLN RD
City-St-Zip: NAVARRE, FL 32566

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: () 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: DAVID J MOREL

PD

08/28/2009

Electronic Signature of Signing Officer or Director

Date