

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # N96000006456

1. Entity Name

GOSPEL IN ACTION TABERNACLE, INC.



**FILED**  
**Aug 18, 2008 08:00 AM**  
**Secretary of State**



Principal Place of Business

PO BOX 551772  
MIAMI FL 33055

Mailing Address

PO BOX 551772  
MIAMI FL 33055

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

65-0773246

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

CALLAHAN, THOMAS  
229 N.W. 56TH STREET  
MIAMI FL 33127

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature and title when constituting)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete  
NAME CALLAHAN, THOMAS APOST.  
STREET ADDRESS 229 N.W. 56TH STREET  
CITY-ST-ZIP MIAMI FL 33127

TITLE VPSD ☐ Delete  
NAME CALLAHAN, SHIRLEY F EVANG.  
STREET ADDRESS 229 N.W. 56TH STREET  
CITY-ST-ZIP MIAMI FL 33127

TITLE D ☐ Delete  
NAME FINCH, CATHERINE MOTHER  
STREET ADDRESS 2421 UTOPIA DR.  
CITY-ST-ZIP MIRAMAR FL 33023

TITLE TD ☐ Delete  
NAME CALLAHAN, EZEKIEL  
STREET ADDRESS 229 N.W. 56TH STREET  
CITY-ST-ZIP MIAMI FL 33127

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
U00000957920  
08/18/08-80008-006 70.00

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

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NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Rev. Thomas Callahan*

*4/25/08 8/15/08*