

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000006456

FILED
May 08, 2009
Secretary of State

Entity Name: GOSPEL IN ACTION TABERNACLE, INC.

Current Principal Place of Business:

PO BOX 551772
MIAMI, FL 33055

New Principal Place of Business:

6500 N W 15 AVENUE
MIAMI, FL 33147

Current Mailing Address:

PO BOX 551772
MIAMI, FL 33055

New Mailing Address:

FEI Number: 65-0773246 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

Name and Address of New Registered Agent:

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

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CALLAHAN, THOMAS APOST.
Address: 229 N.W. 56TH STREET
City-St-Zip: MIAMI, FL 33127

Title: VPSD () Delete
Name: CALLAHAN, SHIRLEY F EVANG.
Address: 229 N.W. 56TH STREET
City-St-Zip: MIAMI, FL 33127

Title: D () Delete
Name: FINCH, CATHERINE MOTHER
Address: 2421 UTOPOIA DR.
City-St-Zip: MIRAMAR, FL 33023

Title: TD () Delete
Name: CALLAHAN, EZEKIEL
Address: 229 N.W. 56TH STREET
City-St-Zip: MIAMI, FL 33127

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: THOMAS CALLAHAN

PD

05/08/2009

Electronic Signature of Signing Officer or Director

Date