

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000880

FILED
Feb 17, 2009
Secretary of State

Entity Name: TABERNACLE OF FAITH COMMUNITY DEVELOPMENT CORPORATION, INC.

Current Principal Place of Business:

2821 N.W. 13TH ST
POMPANO BEACH, FL 33069 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 120130
FORT LAUDERDALE, FL 33312 US

New Mailing Address:

FEI Number: 65-0832194

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, CHARLIE E JR
3541 N.W. 9TH CT.
FORT LAUDERDALE, FL 33311 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: P () Delete
Name: WILLIAMS, CHARLIE
Address: P.O. BOX 120130
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: SVPD () Delete
Name: WILLIAMS, JANE
Address: P.O. BOX 120130
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: D () Delete
Name: CLARK, ALONZO
Address: 1637 NW 13TH ST
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: D () Delete
Name: JONES, CAROLYN
Address: 7733 TRENT DR 202F
City-St-Zip: TAMARAC, FL 33321

Title: D () Delete
Name: WILLIAMS, CHARLIE III
Address: 7815 N.W. 89TH CT
City-St-Zip: OKEECHOBEE, FL 34972

Title: D () Delete
Name: WILLIAMS, KESHA
Address: 310 MGAN WAY
City-St-Zip: HAMPTON, GA 30228

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
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Address:
City-St-Zip:

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Title: () Change () Addition
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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: CHARLIE E WILLIAMS JR.

P

02/17/2009

Electronic Signature of Signing Officer or Director

Date