

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002462

FILED
Feb 04, 2009
Secretary of State

Entity Name: THE GOSPEL TABERNACLE CHURCH OF JESUS CHRIST APOSTOLIC, INC.

Current Principal Place of Business:

259 SW 27TH AVENUE
FORT LAUDERDALE, FL 33312

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 120097
FT LAUDERDALE, FL 33312

New Mailing Address:

FEI Number: 65-0828566

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MITCHELL, JOSEPHINE
750 CAROLINA AVE
FT LAUDERDALE, FL 33312 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: T () Delete
Name: PIKE, CRESETA
Address: 2735 NW 73RD AVE
City-St-Zip: SUNRISE, FL 33313

Title: D () Delete
Name: GORDON, LETHIE
Address: 51 NW 118 ST
City-St-Zip: MIAMI, FL 33168

Title: D () Delete
Name: JAMES, ZEDEKIAH
Address: 1511 NW 43RD AVE BLDG 9 #105
City-St-Zip: LAUDERHILL, FL 33313

Title: S () Delete
Name: WILLIAMS, SHEENA
Address: 259 SW 27TH AVE
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: DP () Delete
Name: MITCHELL, JOSPEHINE
Address: 750 CAROLINA AVE.
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: D () Delete
Name: MITCHELL, ROBERT
Address: 750 CAROLINA AVE.
City-St-Zip: FORT LAUDERDALE, FL 33312

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
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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: JOSEPHINE MITCHELL

DP

02/04/2009

Electronic Signature of Signing Officer or Director

Date