2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N99000002808

1. Entity Name



FILED Apr 16, 2007 8:00 am Secretary of State

04-16-2007 90334 038 ****61.25

Applied For Part Name	CHARITY	I GRAND TABERNACLE INC.								
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite City & State City & State A. FEL Number 65-1039842 Applied for	4291 N.W. 7TH AVE. 5610 NW 174 DF			9						
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite City & State City & State A. FEI Number 65-1039842 Applied for 65-1039842 Navigable for 65-1039										
City & State Country Country Country S. Certificate of Status Dealed Secretificate of New Registered Agent HOUMES, ELLEN S 1918 N W. 51 ST. MIAMI, F. 1 33142 Signature Signature Dealed Secretificate of Country Dealed D	2. Principal Place of Business - No P.O. Box # 3. N		3. Mailing Address	3. Mailing Address						
Country Zip Country Zip Country Zip Country St. Certificate of Status Desired \$8.75 Additional Fee Required \$8.75 Additional Fee Required	Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		02112007 _{Ch}	ng-NP	CR2E037 (12/06	5)	
E. Name and Address of Current Registered Agent 6. Name and Address of Current Registered Agent 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 an familiar with, and accept the outligations of registered agent. SIGNATURE FILING Foe is \$61.25 Due by May 1, 2007 Defended Prices and Directors Trust Fund Contribution TITL MAK STRET AUDRESS STRET AUDRES	City & State		City & State	City & State			2			
HOLMES, ELLEN S 1918 N.W. 51 ST. MIAMI, FL 33142 City FL Zip Code	Zip	Country	Zip	Country	5	i. Certificate of Sta	atus Desired		Additional	
HOLMES, ELLEN S 1918 N.W. 51 ST. MIAMI, FL 33142 City FL Zip Code	6. Name and Address of Current Registered Agent									
City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature S										
B. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature				Street Address		. Box Number is h	Not Acceptable)) 		
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Filing Fee is \$61.25 Due by May 1, 2007 10. OFFICERS AND DIRECTORS										
Due by May 1, 2007 Trust Fund Contribution. Added to Fees Florida Department of State										
Due by May 1, 2007 Trust Fund Contribution. Added to Fees Florida Department of State	Filling Fee is \$81.25 9. Election Campaign Finan									
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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 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.