2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003930

FILED Apr 07, 2009 Secretary of State

Entity Name: GLORY TABERNACLE CHURCH OF GOD INC.

Current Principal Place of Business: New Principal Place of Business:

89 MAGNOLIA AVE GRETNA, FL 32352

Current Mailing Address: New Mailing Address:

EARL MOORE 885 NEWBERRY RD. QUINCY, FL 32352

FEI Number: 59-3671855 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

 MOORE, EARL L
 MOORE, EARL L

 616 3RD ST.
 885 NEWBERRY RD.

 QUINCY, FL 32351
 US

 QUINCY, FL 32352
 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: EARL L MOORE 04/07/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 MOORE, EARL L
 Name:
 MOORE, EARL L

 Address:
 616 3RD STREET
 Address:
 885 NEWBERRY RD.

 City-St-Zip:
 QUINCY, FL 32351
 City-St-Zip:
 QUINCY, FL 32352

Title: VPD () Delete Title: () Change () Addition

 Name:
 MOORE, SHIRLEY J
 Name:

 Address:
 616 3RD STREET
 Address:

 City-St-Zip:
 QUINCY, FL 32351
 City-St-Zip:

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf D} \qquad {\sf (X) Change () Addition}$

 Name:
 SMITH, TAWANA
 Name:
 MOORE, JUANITA

 Address:
 117 SOUTH MALCOLM ST
 Address:
 885 NEWBERRY RD.

 City-St-Zip:
 QUINCY, FL 32351
 City-St-Zip:
 QUINCY, FL 32352

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: SHIRLEY J MOORE VPD 04/07/2009