

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735241

Entity Name: APOSTOLIC FAITH TABERNACLE CHURCH, INC.

Current Principal Place of Business:

C/O PASTOR ALBERTA CAMPBELL
616 OLLIVE AVENUE
TITUSVILLE, FL 32796

Current Mailing Address:

C/O PASTOR ALBERTA CAMPBELL
P.O. BOX 614
TITUSVILLE, FL 32881

FEI Number: 59-2386977

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CAMPBELL, ALBERTA
616 OLIVE AVENUE
TITUSVILLE, FL 32781 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

Officer/Director Detail :

Title CT
Name CAMPBELL, ALBERTA
Address 616 OLIVE AVENUE
City-State-Zip: TITUSVILLE FL 32796

Title T
Name MOORE, JESSIE L
Address P O BOX 618
City-State-Zip: MIMS FL 32759

Title T
Name MUSGROVE, EUZERA L.
Address P O BOX 186
City-State-Zip: CLARCONA FL 32710

Title T
Name CHATTMAN, CARRIE
Address 4055 KIRKLAND BLVD
City-State-Zip: ORLANDO FL 32811

Title T
Name EADDY, JAMES
Address 1433 KINGS CT.
City-State-Zip: TITUSVILLE FL 32780

I hereby 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 all other like empowered.

SIGNATURE: ALBERTA CAMPBELL

PASTOR

03/18/2013

Electronic Signature of Signing Officer/Director Detail

_____ Date