

**2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 771018

**Entity Name:** TRUE TABERNACLE OF GOD INC.**Current Principal Place of Business:**2204 NW 20TH STREET  
FORT LAUDERDALE, FL 33311**Current Mailing Address:**2204 NW 20TH STREET  
FORT LAUDERDALE, FL 33311 US**FEI Number:** 05-0283500**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**GARY, BISHOP MELVIN U SR.  
2204 NW 20TH ST.  
FORT LAUDERDALE, FL 33311 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:** BISHOP MELVIN U GARY, SR

01/04/2025

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CHAIRMAN, VC, TREASURER,  
BISHOP, PASTOR  
Name GARY, MELVIN U SR.  
Address 2204 NW 20TH STREET  
City-State-Zip: FORT LAUDERDALE FL 33311

Title MEMBER  
Name ALLEN, VERA  
Address 1101 NW 45 AVENUE  
City-State-Zip: LAUDERHILL FL 33313

Title AUTHORIZED REPRESENTATIVE  
Name JONES, PHYLLIS DR.  
Address 1136 PATUXENT GREENS DR  
City-State-Zip: LAUREL MD 20708

Title MEMBER  
Name GARY, JEFFREY L  
Address 2830 NW 15TH ST  
City-State-Zip: FORT LAUDERDALE FL 33311

Title SECRETARY  
Name MOORE, PAULA  
Address 828 NW 10 AVE #2  
City-State-Zip: FORT LAUDERDALE FL 33311

*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:** PHYLLIS JONES**AUTHORIZED  
REPRESENTATIVE**

01/04/2025

Electronic Signature of Signing Officer/Director Detail

Date