

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED

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Jun 18, 2024

Entity Name: TABERNACLE OF GOD MINISTRIES, INC.

Secretary of State

3873246559CC

Current Principal Place of Business:

1200 W. CENTRAL BLVD.
ORLANDO, FL 32805

Current Mailing Address:

1200 W. CENTRAL BLVD.
ORLANDO, FL 32805

FEI Number: 59-3712350

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BROWN, RONALD H
1200 W. CENTRAL BLVD.
ORLANDO, FL 32805 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 FOUNDER/CEO
Name BROWN, RONALD H
Address 1200 WEST CENTRAL BLVD
City-State-Zip: ORLANDO FL 32805

Title CFO, COO, PRESIDENT
Name FRANKLIN BROWN, JERLEEN
Address 1200 WEST CENTRAL BLVD
City-State-Zip: ORLANDO FL 32805

Title CO-TRUSTEE
Name BROWN, KIMESHA
Address 1200 WEST CENTRAL BLVD
City-State-Zip: ORLANDO FL 32805

Title TRUSTEE
Name JETER, DOMINIQUE
Address 1200 WEST CENTRAL BLVD
City-State-Zip: ORLANDO FL 32805

Title DEACONESS
Name VICKERS, VICKIE
Address 1200 W. CENTRAL BLVD
City-State-Zip: ORLANDO FL 32805

Title TRUSTEE
Name REEZE, SHALONA BRE'SHAY
Address 1200 WEST CENTRAL BLVD
City-State-Zip: ORLANDO FL 32805

Title TRUSTEE
Name REEZE, DEMITRIS KENNARD
Address 1200 WEST CENTRAL BLVD.
City-State-Zip: ORLANDO FL 32805

Title TRUSTEE
Name MCQUITTER, GREG
Address 1200 W. CENTRAL BLVD.
City-State-Zip: ORLANDO FL 32805

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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: JERLEEN FRANKLIN BROWN

ADMINISTRATOR

06/18/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DEACON
Name LEWIS, JOE
Address 1200 W. CENTRAL BLVD.
City-State-Zip: ORLANDO FL 32805