2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004611

Entity Name: TABERNACLE BIBLE COLLEGE, INC.

Current Principal Place of Business:

221 A PAULS DRIVE BRANDON, FL 33511

Current Mailing Address:

PO BOX 89485 TAMPA. FL 33689

FEI Number: 59-3803497 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LANGSTON, FLOYD LAWRENCE DR. 221 A PAULS DRIVE BRANDON, FL 33511 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: DR. FLOYD LAWRENCE LANGSTON

04/03/2024

FILED Apr 03, 2024

Secretary of State

3177947828CC

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title **PRESIDENT** Title **TREASURER** LANGSTON, FLOYD LAWRENCE DR. HENRY, ANGELA Name Name P.O. BOX 89485 P.O. BOX 89485 Address Address City-State-Zip: TAMPA FL 33689 City-State-Zip: TAMPA FL 33689

SECRETARY Title Title VΡ

Name DUKE, PATRICIA DR. Name RIVERA, EYLEEN DR.

Address P.O.BOX 89485 Address P.O.BOX 89485 City-State-Zip: TAMPA FL 33689 City-State-Zip: TAMPA FL 33689

Title TRUSTEE Title **TRUSTEE**

Name SINCLAIR, BRIAN DR. TAGOE, MICHAEL DR. Name

Address P.O.BOX 89485 Address P.O.BOX 89485

City-State-Zip: TAMPA FL 33689 City-State-Zip: TAMPA FL 33689

Title **TRUSTEE**

SAFFOURI, R.J. DR. Name Address P.O.BOX 89485 City-State-Zip: TAMPA FL 33689

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.

04/03/2024 SIGNATURE: DR. FLOYD LAWRENCE LANGSTON **PRESIDENT**

Electronic Signature of Signing Officer/Director Detail

Date