DOCUMENT# N13000002306				Apr 06, 2019	
Entity Name: FAITH TABERNACLE MINISTRY OF WEST PALM BEACH, INC				Secretary of State 1388243974CC	ļ
Current Principal Place of Business: 1300243974C 2658 SW ACE RD PORT SAINT LUCIE, FL 34953					
Current Mailing Address:					
2658 SW ACE RD					
PORT SAINT LUCIE, FL 34953 US					
FEI Number: 46-2452935 Certific			Certificate of	rtificate of Status Desired: No	
Name and Address of Current Registered Agent:					
PIERCE, ALLEN L 2658 SW ACE RD PORT SAINT LUCIE, FL 34953 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	ALLEN L PIERCE			04/06/20	19
	Electronic Signature of Registered Agent			Date	_
Officer/Director Detail :					
Title	PASTOR AND FOUNDER	Title	ASSOCIATE PA	STOR AND LADY	
Name	PIERCE, ALLEN L	Name	FRAZIER-PIER	CE, MICHELLE A	
Address	2658 SW ACE RD	Address	2658 SW ACE R	D	
City-State-Zip:	PORT SAINT LUCIE FL 34953	City-State-Zip:	PORT SAINT LU	ICIE FL 34953	
Title	ASST. SECRETARY	Title	ASST. TREASU	RER	
Name	FRAZIER, BRIDGETTE S	Name	BROOKS, JOSE	PHINE N	

Address

PO BOX 220961 City-State-Zip: WEST PALM BEACH FL 33422

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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: ALLEN L PIERCE

PO BOX 220961

City-State-Zip: WEST PALM BEACH FL 33422

Address

Electronic Signature of Signing Officer/Director Detail

Date