

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000002306

**Entity Name:** FAITH TABERNACLE MINISTRY OF WEST PALM BEACH, INC

**Current Principal Place of Business:**

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

**Certificate 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

05/17/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PASTOR AND FOUNDER

Name PIERCE, ALLEN L

Address 2658 SW ACE RD

City-State-Zip: PORT SAINT LUCIE FL 34953

Title ASSOCIATE PASTOR AND LADY

Name FRAZIER-PIERCE, MICHELLE A

Address 2658 SW ACE RD

City-State-Zip: PORT SAINT LUCIE FL 34953

Title ASST. SECRETARY

Name FRAZIER, BRIDGETTE S

Address PO BOX 220961

City-State-Zip: WEST PALM BEACH FL 33422

Title ASST. TREASURER

Name BROOKS, JOSEPHINE N

Address PO BOX 220961

City-State-Zip: WEST PALM BEACH FL 33422

*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

PASTOR AND FOUNDER

05/17/2020

Electronic Signature of Signing Officer/Director Detail

Date