

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N20000003662

**Entity Name:** TABERNACLE OF GRACE CHURCH, INC.**Current Principal Place of Business:**9488 YELLOWTHROAT AVE.  
WEEKI WACHEE, FL 34614**Current Mailing Address:**9488 YELLOWTHROAT AVE.  
WEEKI WACHEE, FL 34614**FEI Number:** 84-5151465**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CIUS, EDDY  
9488 YELLOWTHROAT AVE.  
WEEKI WACHEE, FL 34614 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           | DIR                   |
| Name            | DESTINE, SAMUEL       |
| Address         | 13185 RAIN OWL AVE    |
| City-State-Zip: | WEEKI WACHEE FL 34614 |

|                 |                       |
|-----------------|-----------------------|
| Title           | SEC                   |
| Name            | DERIVAL, EDELINE      |
| Address         | 11314 MAHOPAC ROAD    |
| City-State-Zip: | WEEKI WACHEE FL 34614 |

|                 |                       |
|-----------------|-----------------------|
| Title           | TRE                   |
| Name            | EDDY, CIUS            |
| Address         | 9488 YELLOWTHROAT AVE |
| City-State-Zip: | WEEKI WACHEE FL 34614 |

|                 |                       |
|-----------------|-----------------------|
| Title           | ASST. TREASURER       |
| Name            | DESTINE, SAMUEL       |
| Address         | 13185 RAIN OWL AVE    |
| City-State-Zip: | WEEKI WACHEE FL 34614 |

|                 |                        |
|-----------------|------------------------|
| Title           | PRE                    |
| Name            | CIUS, EDDY             |
| Address         | 9488 YELLOWTHROAT AVE. |
| City-State-Zip: | WEEKI WACHEE FL 34614  |

*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:** EDDY CIUS**04/26/2023**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date