

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

DOCUMENT# N24111

**Entity Name:** TABERNACLE OF PRAYER MISSION, INC.

**Current Principal Place of Business:**

C/O ELDER DOVER WYNN, JR.  
37 EAST 19TH STREET  
APOPKA, FL 32703

**Current Mailing Address:**

C/O ELDER DOVER WYNN, JR.  
1753 SUN RIDGE DR.  
APOPKA, FL 32703

**FEI Number: 59-2855310**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

WYNN, DOVER JR.  
1753 SUN RIDGE DR.  
APOPKA, FL 32703 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            PRESIDENT AND PASTOR  
Name            PASTOR, DOVER WYNN JR  
Address        C/O ELDER DOVER WYNN, JR.  
                  1753 SUN RIDGE DR.  
City-State-Zip: APOPKA FL 32703

Title            OTHER, MINISTER  
Name            WYNN, LOVIE  
Address        C/O ELDER DOVER WYNN, JR.  
                  1753 SUN RIDGE DR.  
City-State-Zip: APOPKA FL 32703

Title            EXECUTIVE SECRETARY  
Name            WYNN, ANGELA  
Address        C/O ELDER DOVER WYNN, JR.  
                  1753 SUN RIDGE DR.  
City-State-Zip: APOPKA FL 32703

Title            MINISTER  
Name            HASTINGS, DEBORAH  
Address        410 WEST KEENE ROAD  
City-State-Zip: APOPKA FL 32703

*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: DOVER WYNN JR**

**PRESIDENT & PASTOR**

**03/01/2023**

Electronic Signature of Signing Officer/Director Detail

Date