## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT **CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 701031

(7)

THE TABERNACLE, INC.

| Principal | Place | of | Business |
|-----------|-------|----|----------|

2. Principal Place of Business

Sulte, Apt. #, etc.

City & State

Mailing Address

4141 DESOTO ROAD SARASOTA FL 34235

21

22

4141 DESOTO ROAD SARASOTA FL 34235-3614

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

## FILED Mar 17 1997 8:00am Secretary of State

3a. Date of Last Report 01/31/1996

Applied For

\$8.75 Additional

Fee Required

Not Applicable

3. Date Incorporated or Qualified 06/02/1960

5. Certificate of Status Desired

4. FEI Number 59-1353567

| City & Stat                  | e   | City & State   |                     |       |                  | 6. Election Campaign Financing \$5.00 May Be  |
|------------------------------|---|--|---------------------|-------|------------------|---|
| 23                           |   | 28   |                     |       |                  | Trust Fund Contribution Added to Fees   |
| Zip                          | Country   | Zip  | _                   | untry |                  | 8. This corporation has liability for intangible tax under s. 199.032,  |
| 24                           | 25  | 29   | 30                  |       |                  | Florida Statutes Yes No   |
|                              | 9. Name and Address of Curr   | ent Registered Agent                                   |                     | 1     |                  | 10. Name and Address of New Registered Agent  |
|                              |   |  |                     | 81    | Name             |   |
|                              | in, <b>ro</b> bert george   |  |                     | 82    | Street Add       | dress (P.O. Box Number is Not Acceptable)   |
|                              | ECOND ST. #918  |  |                     | Ш     |                  |   |
| SARASO                       | OTA FL 34236  |  |                     | 83    |                  |   |
|                              |   |  |                     | 84    | City             | <b>85</b> Zip Code  |
|                              | ·<br>   |  |                     |       |                  | FL 60 20 Code   |
| office or r                  | to the provisions of Sections 617.0 egistered agent, or both, in the Sta<br>m familiar with, and accept the obl | ite of Florida. Such chan                              | ge was authorize    | d by  | the corpora      | proration submits this statement for the purpose of changing its registere<br>ation's board of directors. I hereby accept the appointment as registered   |
| SIGNATURE                    |   |  |                     |       |                  |   |
|                              | Signature, typed or printed name of registered  | <del></del>  |                     | d Age | nt signature req | jured when reinstating) DATE  |
| 12.                          |   | ND DIRECTORS   | 13.                 |       | <del></del>      | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12   |
| TITLE                        | STD<br>CASE PORCET  | DE   |                     |       |                  | Change Additi   |
| NAME                         | CASE, ROBERT  | •  | 1.2 N               |       |                  |   |
| STREET ADDRESS               | 6033 34TH ST. W., APT. 48   | •  |                     |       | ADDRESS          |   |
| CITY-ST-ZIP                  | BRADENTON FL<br>PD  | DE   |                     | ITY-S | T-ZIP            | Change Additi   |
| TITLE                        | - <del>-</del>  | U DE   |                     |       |                  | Clands C Woodu  |
| NAME                         | KING, KENNETH   | 4 E  | 2.2 N               |       |                  |   |
| STREET ADDRESS               | 5844 WHISTLEWOOD CIRC<br>SARASOTA FL  | LE   | i i                 |       | ADDRESS          |   |
| City-St-ZIP<br>Title         | VD VD   | DE   |                     |       | ST - ZIP         | Change Addili   |
| NAME                         | MULLET, WILLIAM JR  |  | 3.2 N               |       |                  | Change Modili   |
| STREET ADDRESS               | 931 TANGLED OAKS DRIVE  | =  |                     |       | ADDRESS          |   |
|                              | SARASOTA FL   | -  |                     |       | - 1              |   |
| CITY-ST-ZIP<br>TITLE         | D   | DE   |                     |       | ST-ZIP           | Change Additi   |
| NAME                         | STECHER, JAMES  | b.   | 4.21                |       |                  | — Committy — Notices  |
| STREET ADDRESS               | 640 FONTANA LANE  |  | 2 ···               |       | ADDRESS          |   |
| CITY-ST-ZIP                  | BRADENTON FL  |  |                     | ITY-S |                  |   |
| TITLE                        | D   | [] DE  | LETE 5.1 T          |       | 1 - EII          | ☐ Change ☐ Additi   |
| NAME                         | BENHAM, CHARLES P.  |  | 5.2 N               |       | [                |   |
| STREET ADDRESS               | 1411 29TH ST., W.   |  |                     |       | ADDRESS          |   |
| CITY-ST-ZIP                  | BRADENTON FL  |  |                     | ITY-S | - 1              |   |
| TITLE                        | 0   | DE   |                     |       | · *"             | Change Addition   |
| NAME                         | SOUDERS, JOHN   | _  | 6.2 N               |       |                  |   |
| STREET ADDRESS               | 5016 DELMONTE AVE.  |  |                     |       | ADDRESS          |   |
| CITY-ST-ZIP                  | SARASOTA FL   |  |                     | ITY-S |                  |   |
| 14. I do hereb<br>informatio | by certify that the information suppling indicated on this annual report of                                     | r supplemental annual re<br>or the receiver or trustee | not qualify for the | exe   | mption state     | ed in Section 119.07(3)(i), Florida Statutes. I further certify that the<br>at my signature shall have the same legal effect as if made under oath; the<br>ort as required by Chapter 617, Florida Statutes; and that my name |