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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # 711607

(2)

TABERNACLE BAPTIST CHURCH OF VERO BEACH, INC.

FILED Feb 09 1996 8:00 am Secretary of State

Principal Place of Business Mailing Address						. 1881.(1.1884) (1881 11818 Striff SB)				
51 OLD DIX	IE HWY									
VERO BEAC	H FL 32962	51 OLD DIXIE HWY VERO BEACH FL 32962								
US		US			3. Date	Incorporated or Qualified	3a. Da	te of Last	Report	
								02/03/1995		
2. Principal P	lace of Business	2a. Mailing Address		1	4. FEII				Applied For	
21 51 C	old Dixie Hwy		Dixie F	-luvu		59-1449858			Not Applicable	
Suite, Apt.		Suite, Apt. #, etc.	- IAIC I	11v.y	t				5 Additional	
22		27			5. Cert	ificate of Status Desired			Required	
City & State	e O	City & State	ı		6. Flec	tion Campaign Financing			O May Be	
23 Verc	Beach, FL	28 Vero Be	ach,	FL	1	t Fund Contribution			of to Fees	
Zip	Country	Zip	Country	0	8. This	corporation has liability for	intangible ta			
24 3'a		29 32962 3	o Inda	1/2/VCK						
	9. Name and Address of Current F	Registered Agent			10. Name and Address of New Registered Agent					
			81 N	ame						
Bair, H	IARVEY		82 S	treet Addres	ss (P.O. Bo	ox Number Is Not Acceptat	le)			
2165 87	TH ST.		[]				,			
VERO B	BEACH FL 32960		83							
			84 C	ity				7221 5	- 0- 4-	
				rty			FL	85 Zi	p Code	
11. Pursuant	to the provisions of Sections 617.0502 ar	nd 617.1508, Florida Statutes, t	he above nam	ed corporat	ion submi	ts this statement for the pu	pose of cha	nging its	registered office	
or registe: familiar wi	red agent, or both, in the State of Florida. ith, and accept the obligations of, Section	Such change was authorized b 617.0503, Florida Statutes.	by the corporat	ion's board	of directo	rs. I hereby accept the app	ointment as	registered	agent. I am	
ı	1/1									
SIGNATORE.	Signature, typed or partied name of registered agent and	title if applicable (NOTE: R	legistered Agent sig	nature recjulred w	vhen reinstatin	9)	DATE	······································		
12.	OFFICERS AND I	DIRECTORS	13.			ITIONS/CHANGES TO OFF	ICERS AND	DIRECTO	DRS IN 12	
TITLE	SD	DELETE	1.1 TITLE		esur			Change	Addition	
NAME	CLEMENTS, RICHARD		1.2 NAME	Jo	hn S	Saxon, Sr.			, ,	
STREET ADDRESS	2300 85TH AVE		1.3 STREET ADD			15th Ave.	_			
CITY-ST-ZIP	VERO BEACH FL		1.4 CHTY - ST - ZI	ı V	ero 1	Beach, FL	3294	<i>,</i> O		
THILE	CD	DELETE	2.1 TITLE			,		Change	☐ Addition	
NAME	BINTZ, DALE		2.2 NAME							
STREET ADDRESS	8504 BROOKLINE AVE.		2.3 STREET ADD	RESS						
CHTY - ST - ZIP	FT. PIERCE FL 34951		2 4 CITY-ST-Z	Р						
THLE	TD	DELETE	3.1 TITLE					Change	Addition	
NAME	LINDHORST, RICHARD	,	3.2 NAME							
STREET ADDRESS	3430 1ST STREET SW		3.3 STREET ADD	ress						
CITY-ST-ZIP	VERO BEACH FL		3.4. CITY-ST-Z	Р						
TITLE	VPD	DELETE	4.1 TITLE				1	Change	☐ Addition	
NAME	STELOW, AL		4. 2 NAME							
STREET ADDRESS	1435 5TH PLACE		4.3 STREET ADD	RESS						
CrTY-ST-ZIP	VERO BEACH FL		4.4 CITY-ST-ZI	, ·						
TITLE	PD	DELETE	5.1 TITLE				Ι	Change	Addition	
NAME	BAIR, HARVEY		5.2 NAME	1			_	-		
STREET ADDRESS	2165 8TH ST.		5.3 STREET ADO	RESS						
CITY-ST-ZIP	VERO BCH., FL 32960		5.4 CITY-ST-2I	1						
TITLE		DELETE	6.1 TITLE					Change	Addition	
NAME			62 NAME				_	•	<u> </u>	
STREET ADDRESS			6.3 STREET ADD	ness					ļ	
CITY-ST-ZIP			6.4 CITY-ST-ZI							
200 C PM	<u> </u>		0.4 0.41 - 31 - 21							

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

ALL THE SECTION OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE: