2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N00000003553

Entity Name: TABERNACLE ECONOMIC DEVELOPMENT, INC.

FILED May 02, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1217 NE OSCEOLA AVE. OCALA, FL 34470 **Current Mailing Address: New Mailing Address:** 1217 NE OSCEOLA AVE. OCALA, FL 34470 FEI Number: 65-1013516 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BROWN, ROZELLA 1217 NE OSCEOLA AVE. OCALA, FL 34470 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BROWN, ROZELLA Name: Name: 1217 NE OSCEOLA AVE. Address: Address: City-St-Zip: OCALA, FL 34470 City-St-Zip: Title: SD () Delete Title: () Change () Addition FRANKLIN, LORETTA Name: Name: Address: 73 NW 21ST PLACE Address: City-St-Zip: OCALA, FL 34470 City-St-Zip: Title: () Delete Title: () Change () Addition JACKSON, MARY Name: Name: 1613 NW 20TH AVE. Address: Address: City-St-Zip: OCALA, FL 34470 City-St-Zip: Title: () Delete Title: () Change (X) Addition Name: Name: JACKSON, EDDIE L SR 1945 NW 4TH STREET Address: Address: City-St-Zip: City-St-Zip: OCALA, FL 34470 Title: () Delete Title: () Change (X) Addition BROWN, CHRISTINE Name: Name: 1120 WEST SILVER SPRINGS BLVD Address: Address: City-St-Zip: City-St-Zip: OCALA, FL Title: () Delete Title: () Change (X) Addition JACKSON, EDDIE L JR Name: Name: Address: Address: 1930 NW 27TH AVENUE OCALA, FL 34475 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LORETTA FRANKLIN SD 05/02/2003