

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002850

FILED
Feb 07, 2019
Secretary of State
6650949370CC

Entity Name: TABERNACLE COMMUNITY EMPOWERMENT FOUNDATION, INC.

Current Principal Place of Business:

615 TUSKEGEE ST
TALLAHASSEE, FL 32310

Current Mailing Address:

P O BOX 55
TALLAHASSEE, FL 32302 US

FEI Number: 55-0869945

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

JAMES, LORRAINE
615 TUSKEGEE ST
TALLAHASSEE, FL 32310 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: LORRAINE JAMES

02/07/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name HARRIS, BEN
Address P.O.BOX 10264
City-State-Zip: TALLAHASSEE FL 32302

Title D
Name WALKER, STANLEY L SR
Address P O BOX 5982
City-State-Zip: TALLAHASSEE FL 32314

Title D
Name KEANON, ROBERT
Address 630 W BREVARD ST
City-State-Zip: TALLAHASSEE FL 32303

Title DIRECTOR
Name WILLIAMS, COSTELL D
Address 3326 DARTMOUTH DRIVE
City-State-Zip: TALLAHASSEE FL 32317

Title DIRECTOR
Name SMITH, CARLETTE
Address 5990 SMITHVILLE LANE
City-State-Zip: TALLAHASSEE FL 32309

Title DP
Name JAMES, LORRAINE
Address 1010 WINFIELD FOREST DRIVE
City-State-Zip: TALLAHASSEE FL 32317

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: LORRAINE JAMES

DP

02/07/2019

Electronic Signature of Signing Officer/Director Detail

Date