

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2007 8:00 am
Secretary of State

01-19-2007 90023 012 ****61.25

DOCUMENT # N05000001507 1. Entity Name TABERNALE OF DAVID, INC.					
Principal Place of Business 1111 WEST FAITH CL. 2001 BRADENTON, FL 34212			Mailing Address P. O. BOX 21294 BRADENTON, FL 34204		
2. Principal Place of Business - No P.O. Box 2311 14th Ave W #508			3. Mailing Address 2311 14th Ave W Suite, Apt. #, etc. #508		
City & State PALMETTO, FL		City & State PALMETTO, FL		4. FEI Number NOT APPLICABLE	
Zip 34221		Country MANATEE		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HOWELL, MARY S 1111 WEST FAITH CL. 2001 BRADENTON, FL 34212				7. Name and Address of New Registered Agent Name DICK K HARDIN Street Address (P.O. Box Number is Not Acceptable) 2311 14th Ave W #508 City PALMETTO FL Zip Code 34221	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u><i>Dick K. Hardin</i></u> 1/11/07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HINTON, DANIEL A 1012 WEST FAITH CL. BRADENTON, FL 34212	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HINTON, CAROL E 1012 WEST FAITH CL. BRADENTON, FL 34212	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HOWEL, MARY S 1111 WEST FAITH CL. W., #2001 BRADENTON, FL 34212	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HARDIN, DICK K 2311 14th Ave W #508 PALMETTO, FL 34221 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD PUGH, HIXSON 1012 WEST FAITH CL. BRADENTON, FL 34212	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HELMS, BERNIE 15009 SR 64 E. BRADENTON, FL 34212	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HELMS, SANDY 15009 SR 64 E. BRADENTON, FL 34212	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>Daniel Hinton</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				Date <u>11 JAN 07</u> Daytime Phone # _____	

50000649



01112007 Chg-NP CR2E037 (12/06)