

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002969

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: TABERNACLE GRACE BAPTIST CHURCH INC.

**Current Principal Place of Business:**

723 WEST PEACHTREE  
LAKELAND, FL 33801

**New Principal Place of Business:**

**Current Mailing Address:**

723 WEST PEACHTREE  
LAKELAND, FL 33801

**New Mailing Address:**

FEI Number: 74-3168281

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LUCKETT, JAMES  
723 WEST PEACHTREE  
LAKELAND, FL 33801 US

**Name and Address of New Registered Agent:**

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:**

Title: C ( ) Delete  
Name: LUCKETT, RICHARD E  
Address: 1401 HARRY ST.  
City-St-Zip: YPSILANTI, MI 48198

Title: D ( ) Delete  
Name: RICH, JEANENE  
Address: 1219 ROBERT KING HIGH DR  
City-St-Zip: LAKELAND, FL 33805

Title: P ( ) Delete  
Name: LUCKETT, JAMES  
Address: 723 WEST PEACHTREE  
City-St-Zip: LAKELAND, FL 33801

Title: S ( ) Delete  
Name: GAINER, SANDRA D  
Address: 5070 MENLO PARK #307  
City-St-Zip: LAKELAND, FL 33805

Title: T ( ) Delete  
Name: AMOS, JOSEPH L  
Address: 1401 HARRY ST.  
City-St-Zip: YPSILANTI, MI 48198

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: SANDRA GAINER

RA

04/29/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date