

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000006268

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: TABERNACLE OF PRAISE FOR ALL NATIONS INC.

**Current Principal Place of Business:**

2062 PASA VERDE LN  
WESTON, FL 33327

**New Principal Place of Business:**

**Current Mailing Address:**

2062 PASA VERDE LN  
WESTON, FL 33327

**New Mailing Address:**

FEI Number: 56-2670974      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

BRANKER, MAUREEN  
6101 SW 33RD ST  
MIRAMAR, FL 33023      US

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

BRANKER, MAUREEN  
750 S.W. 133RD TERR  
APT. 112C  
PEMBROKE PINES, FL 33027      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: MAUREEN BRANKER      04/30/2009  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: BRANKER, MARK  
Address: 2062 PASA VERDE LN  
City-St-Zip: WESTON, FL 33327

Title: VP      ( ) Delete  
Name: BRANKER, TRICIA  
Address: 2062 PASA VERDE LN  
City-St-Zip: WESTON, FL 33327

Title: D      ( ) Delete  
Name: ADAMS, ADRIAN  
Address: 768 BRADY AVE  
City-St-Zip: BRONX, NY 10462

Title: D      ( ) Delete  
Name: BRANKER, MAUREEN  
Address: 6101 SW 33RD ST  
City-St-Zip: MIRAMAR, FL 33023

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

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

Title: VP      (X) Change ( ) Addition  
Name: BRANKER, TRICIA  
Address: 2062 PASA VERDE LANE  
City-St-Zip: WESTON, FL 33327

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

Title: D      (X) Change ( ) Addition  
Name: BRANKER, MAUREEN  
Address: 750 S.W. 133RD TERR., APT. 112C  
City-St-Zip: PEMBROKE PINES, FL 33027

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: ADRIAN ADAMS      D      04/30/2009  
Electronic Signature of Signing Officer or Director      Date