DOCUMENT# N09000010851
Entity Name: TABERNACLE OF PRAISE CHRISTIAN CENTER, INC.

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

.

Current Principal Place of Business:

6032 STATE RD 544 WINTER HAVEN, FL 33881

Current Mailing Address:

995 BATES RD. HAINES CITY, FL 33844

FEI Number: 80-0483915

Name and Address of Current Registered Agent:

ANGLIN, MARYE T 995 BATES RD HAINES CITY, FL 33844 US Jul 16, 2016 Secretary of State CC6538751979

Date

Certificate of Status Desired: No

FILED

238/4 119

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

Officer/Director Detail :

Title	PRES	Title	DS
Name	ANGLIN, JONATHAN SR.	Name	ANGLIN, QUALONDA Q
Address	995 BATES RD.	Address	133 WINCHESTER LANE
City-State-Zip:	HAINES CITY FL 33844	City-State-Zip:	HAINES CITY FL 33844
Title	D	Title	D
THE	В	1100	B
Name	LEWIS, AUDREY	Name	MAYA, MARILYN
Address	3124 WOODHILL CRT	Address	1121 AVE L
City-State-Zip:	WINTER HAVEN FL 33881	City-State-Zip:	HAINES CITY FL 33844
Title	DP	Title	D
Name	ANGLIN, JONATHAN JR.	Name	CLEMONS, VALERIE
Address	133 WINCHESTER LANE	Address	55 CEDAR ST.
City-State-Zip:	HAINES CITY FL 33844	City-State-Zip:	HAINES CITY FL 33844

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: JONATHAN ANGLIN SR.

PRESIDENT

07/16/2016

Electronic Signature of Signing Officer/Director Detail

Date