

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000006333

**Entity Name:** TABATHA THOMAS WILKERSON MINISTRIES, INC.**Current Principal Place of Business:**432 WEST CANAL STREET SOUTH  
BELLE GLADE, FL 33430**Current Mailing Address:**432 WEST CANAL STREET SOUTH  
BELLE GLADE, FL 33430 US**FEI Number:** 46-5269374**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**WILKERSON, TABATHA T  
432 WEST CANAL ST. SOUTH  
BELLE GLADE, FL 33430 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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

Title	P
Name	WILKERSON, TABATHA T
Address	617 NW 14TH STREET
City-State-Zip:	BELLE GLADE FL 33430

Title	D
Name	KYLES, JACLIN T
Address	275 SW 9TH AVENUE
City-State-Zip:	SOUTH BAY FL 33493

Title	D
Name	SHANNON, GLORIA
Address	749 SOUTH MAIN STREET
City-State-Zip:	BELLE GLADE FL 33430

Title	D
Name	WILKERSON, COREY D
Address	617 NW 14TH STREET
City-State-Zip:	BELLE GLADE FL 33430

Title	D
Name	STEVENSON, MARY
Address	235 SW 11TH AVE
City-State-Zip:	SOUTH BAY FL 33493

*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:** TABATHA THOMAS WILKERSON

P

03/31/2023

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date