

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N21461

**FILED**  
**Jan 15, 2018**  
**Secretary of State**  
**CC4278667970**

**Entity Name:** TABERNACLE MISSIONARY BAPTIST CHURCH OF TALLAHASSEE, INC.

**Current Principal Place of Business:**

615 TUSKEGEE ST.  
TALLAHASSEE, FL 32304

**Current Mailing Address:**

P.O. BOX 5982  
TALLAHASSEE, FL 32314-5982 US

**FEI Number: 59-2138602**

**Certificate of Status Desired: No**

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

WALKER, STANLEY LSR.  
1095 WINTER LANE  
TALLAHASSEE, FL 32311 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 D  
Name USSERY, WILLIE  
Address 1933 CELTIC ROAD  
City-State-Zip: TALLAHASSEE FL 32317

Title P  
Name WALKER, STANLEY LSR.  
Address 1095 WINTER LANE  
City-State-Zip: TALLAHASSEE FL 32311

Title VP  
Name DANIELS, GUS  
Address 3415 GARDENVIEW WAY  
City-State-Zip: TALLAHASSEE FL 32309

Title T  
Name COLLINS, LEROY  
Address 1107 BOB WHITE DR.  
City-State-Zip: TALLAHASSEE FL 32304

Title S  
Name HOWARD, MARGIE  
Address 3108 GALIMORE DRIVE  
City-State-Zip: TALLAHASSEE FL 32305

*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: LEROY COLLINS**

**FINANCE CMTG  
CHAIRMAN**

**01/15/2018**

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

\_\_\_\_\_  
Date