


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2008 8:00 am
Secretary of State

03-28-2008 90020 008 ****70.00

DOCUMENT # N42005							
1. Entity Name TABERNACLE CHURCH OF CHRIST WRITTEN IN HEAVEN OF FLORIDA, INC.							
Principal Place of Business 12425 BLUE STAR HIGHWAY QUINCY, FL 32352			Mailing Address P. O. BOX 160 GRETNA, FL 32332				
2. Principal Place of Business - No P.O. Box #		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.					
City & State		City & State		03262008 Chg-NP CR2E037 (12/06)			
Zip	Country	Zip	Country	4. FEI Number 59-3045454	Applied For Not Applicable		
5. Certificate of Status Desired <input checked="" type="checkbox"/>			\$8.75 Additional Fee Required				
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent				
HARRISON, MAYLIS G PASTOR 511 UPTAIN RD QUINCY, FL 32352			Name				
			Street Address (P.O. Box Number is Not Acceptable)				
			City			FL	Zip Code
			8. 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. I am familiar with, and accept the obligations of registered agent.				
SIGNATURE _____			DATE _____				
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)							
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees			
				Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10				
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	ALLEN, JOHN		NAME	SEE ATTACHMENT			
STREET ADDRESS	RT 4 BOX 1106		STREET ADDRESS				
CITY-ST-ZIP	QUINCY, FL 32351		CITY-ST-ZIP				
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	THOMAS, LONNIE		NAME				
STREET ADDRESS	RT 1 BOX 50		STREET ADDRESS				
CITY-ST-ZIP	QUINCY, FL 32351		CITY-ST-ZIP				
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	MCMILLIAN, DARRYL		NAME				
STREET ADDRESS	RTE. 4, BOX 249		STREET ADDRESS				
CITY-ST-ZIP	QUINCY, FL 32351		CITY-ST-ZIP				
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	PETE, PAULINE		NAME				
STREET ADDRESS	1535 POST PLANT RD		STREET ADDRESS				
CITY-ST-ZIP	QUINCY, FL 32351		CITY-ST-ZIP				
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	ROBERTS, ALVIN SR		NAME				
STREET ADDRESS	1943 ROB WAY		STREET ADDRESS				
CITY-ST-ZIP	TALLAHASSEE, FL 32303		CITY-ST-ZIP				
TITLE	P	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	HARRISON, MAYLIS G PASTOR		NAME				
STREET ADDRESS	511 UPTAIN RD		STREET ADDRESS				
CITY-ST-ZIP	QUINCY, FL 32352		CITY-ST-ZIP				
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.							
SIGNATURE: <i>Elber Maylis Harrison</i>			Date: <i>03-28-08</i>		Daytime Phone # _____		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date		Daytime Phone #		

40052943



ATTACHMENT 40052943
#N42005

**Tabernacle Church of Christ
Written In Heaven, Inc.**

12425 Blue Star Highway
P.O. Box 160
Gretna, Florida 32332
Phone :(850) 856-5280
Fax: (850) 856-9730

CORPORATION OFFICERS

Elder M. Harrison, Senior Pastor
Elder J. McMillan, Assistant Pastor
Mother B. Culver, Secretary
Mother D. Corkers, Assistant Secretary
Mother R. Miller, Treasurer
Deacon H. Jackson, CFO

BOARD OF DIRECTORS

Minister John Allen
Deacon J. Pollock
Deacon Lonnie Thomas
Brother Alvin W. Roberts, Sr.
Deacon Darryl McMillian
Deacon Roger Harrison
Mother Carolyn Kirksey
Elder Charles McCoy

March 26, 2008

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OFFICER ADDED.....EARL BAKER
94 WILLOW OAK ROAD
QUINCY, FL 32351

OFFICER ADDED.....CAROLYN KIRKSEY
10027 BLUE WATERS ROAD
TALLAHASSEE, FL 32305