

FILE NOW: FILING FEE IS \$61.25

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NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N42005** (1)

1. Corporation Name

TABERNACLE CHURCH OF CHRIST WRITTEN IN HEAVEN OF FLORIDA, INC.



Principal Place of Business: P. O. BOX 160, GRETN A FL 32332
Mailing Address: P. O. BOX 160, GRETN A FL 32332

3. Date Incorporated or Qualified 02/11/1991	3a. Date of Last Report 04/10/1995
4. FEI Number 59-3045454	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

21. Principal Place of Business	2a. Mailing Address
22. Suite, Apt. #, etc.	27. Suite, Apt. #, etc.
23. City & State	28. City & State
24. Zip	29. Zip
25. Country	30. Country

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
POLLOCK, NATHANIEL 364 LINCOLN DRIVE CHATTAHOOCHEE FL 32334		81. Name	
		82. Street Address (P.O. Box Number is Not Acceptable)	
		83.	
		84. City	FL 85. Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ALLEN, JOHN	1.2 NAME	
STREET ADDRESS	RT 4 BOX 1106	1.3 STREET ADDRESS	
CITY-ST-ZIP	QUINCY FL 32351	1.4 CITY-ST-ZIP	
TITLE	TD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	THOMAS, LONNIE	2.2 NAME	
STREET ADDRESS	RT 1 BOX 50	2.3 STREET ADDRESS	
CITY-ST-ZIP	QUINCY FL 32351	2.4 CITY-ST-ZIP	
TITLE	TD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCMILLIAN, DARRYL	3.2 NAME	
STREET ADDRESS	RTE. 4, BOX 249	3.3 STREET ADDRESS	
CITY-ST-ZIP	QUINCY FL 32351	3.4 CITY-ST-ZIP	
TITLE	TD <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JACKSON, HARRY LEE	4.2 NAME	000001753780
STREET ADDRESS	723 E. S. ROAD	4.3 STREET ADDRESS	-03/22/96--01012--030
CITY-ST-ZIP	QUINCY FL 32351	4.4 CITY-ST-ZIP	***\$61.25
TITLE	TD <input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HOLLOMAN, LEE I.	5.2 NAME	Williams, Daniel
STREET ADDRESS	P.O BOX 192 N/A	5.3 STREET ADDRESS	P. O. Box 303 N/A
CITY-ST-ZIP	CHATTAHOOCHEE FL 32324	5.4 CITY-ST-ZIP	Gretna, Fl. 32332
TITLE	P <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	POLLOCK, NATHANIEL	6.2 NAME	700001753787
STREET ADDRESS	364 LINCOLN DR	6.3 STREET ADDRESS	-03/22/96--01012--029
CITY-ST-ZIP	CHATTAHOOCHEE FL 32324	6.4 CITY-ST-ZIP	***\$8.75

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Nathaniel Pollock* (904) 662-4131
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (12/95)

Tabernacle Church of Christ
Written in Heaven, Inc.

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P. O. Box 160
Gretna, Florida 32332
Phone (904) 856-5280

V/P
Borders, Maylis
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S
Culver, Betty
Dewey Johnson Way
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V/P
McMillian, Jeremiah
1523 West Live Oak St.
Quincy, Fl 32351

T
Shy, Robie
2025 Osceola St.
Quincy, Fl 32351

D
McCoy, Charles
299 Oakview Drive
Tallahassee, Fl 32301

D
McCray, Alexander
Jackson Street
Gretna, Fl 32332

D
Pollock, Josephine
364 Lincoln Drive
Chattahoochee, Fl 32324

D
Kirksey, Carolyn
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