Current Mai	ling Address:			
P. O. BOX 1 GRETNA, F				
FEI Number: 59-3045454			Certificate of Status Desired: Yes	
Name and A	Address of Current Registered Agent:			
MILLER, MARC 197 LITTLE ME QUINCY, FL 3				
The above name	d entity submits this statement for the nurnose of changing its reg	istarad offica or ragis	stared event or both in the State of	Florida
	d entity submits this statement for the purpose of changing its reg	istered office or regis	stered agent, or both, in the State of	
	d entity submits this statement for the purpose of changing its reg : MARGIE R. MILLER	istered office or regis	tered agent, or both, in the State of	03/06/2019
		istered office or regis	tered agent, or both, in the State of	
SIGNATUR	E: MARGIE R. MILLER	istered office or regis	tered agent, or both, in the State of	03/06/2019
SIGNATUR	E: MARGIE R. MILLER Electronic Signature of Registered Agent	istered office or regis	tered agent, or both, in the State of	03/06/2019
SIGNATURI Officer/Dire	E: MARGIE R. MILLER Electronic Signature of Registered Agent			03/06/2019
SIGNATUR	E: MARGIE R. MILLER Electronic Signature of Registered Agent ctor Detail :	Title	D	03/06/2019
SIGNATURE Officer/Dire Title Name	E: MARGIE R. MILLER Electronic Signature of Registered Agent Ctor Detail : D ALLEN, JOHN 107 MARTIN ST	Title Name	D MCMILLIAN, DARRYL	03/06/2019
SIGNATURE Officer/Dire Title Name Address	E: MARGIE R. MILLER Electronic Signature of Registered Agent Ctor Detail : D ALLEN, JOHN 107 MARTIN ST	Title Name Address	D MCMILLIAN, DARRYL 4036 CHARLES DRIVE	03/06/2019

Address

Title

Title

Name

Address

Name

Address

City-State-Zip:

City-State-Zip:

City-State-Zip:

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42005

Entity Name: TABERNACLE CHURCH OF CHRIST WRITTEN IN HEAVEN OF FLORIDA, INC.

Current Principal Place of Business:

12425 BLUE STAR HIGHWAY QUINCY, FL 32352

Current Meiling Address

Address

Title

Title

Name

Address

Name

Address

City-State-Zip:

City-State-Zip:

City-State-Zip:

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: JEFFERY POLLOCK

1535 POST PLANT RD

QUINCY FL 32351

JOHNSON, JANIE

QUINCY FL 32351

P.O. BOX 245

NEAL, RONNIE

7304 WAGON TRAIL LANE

TALLAHASSEE FL 32310

OFFICER

ELDER

Electronic Signature of Signing Officer/Director Detail

Date

FILED Mar 06, 2019 Secretary of State 7661870346CC

OFFICER

56 VENCENT DRIVE

MIDWAY FL 32343

POLLOCK, JEFFERY

364 LINCOLN DRIVE

CHATTAHOOCHEE FL 32324

OFFICER

OFFICER

GRADY, ANNIE

376 EVANWOOD CT

TALLAHASSEE FL 32303