

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Jan 18, 2000 8:00 am
Secretary of State

01-18-2000 90062 050 ****61.25

DOCUMENT # N46901

1. Entity Name

TABERNACLE OF PRAISE, INC.

Principal Place of Business

350 N JOG RD
WEST PALM BEACH FL 33413
US

Mailing Address

350 N. JOG RD.
WEST PALM BEACH FL 33413-1711
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0302422

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WILLIAMS, RICKY G.
350 N JOG RD
WEST PALM BEACH FL 33413

7. Name and Address of New Registered Agent

Name **BRENDA L. Williams**

Street Address (P.O. Box Number is Not Acceptable)

350 N. Jog Rd.

City **West Palm Beach**

FL | Zip Code **33413**

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.

SIGNATURE

BRENDA L. Williams

Brenda L. Williams

1/5/00

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE **DP** ☒ Delete

NAME **WILLIAMS, RICKY G**
STREET ADDRESS **350 N JOG RD**
CITY-ST-ZIP **WEST PALM BEACH FL**

TITLE **DST** ☐ Delete

NAME **WILLIAMS, BRENDA L**
STREET ADDRESS **350 N JOG RD**
CITY-ST-ZIP **WEST PALM BEACH FL**

TITLE **D** ☐ Delete

NAME **UPTHEGROVE, PANSY R.**
STREET ADDRESS **300 N. JOG RD.**
CITY-ST-ZIP **WEST PALM BEACH FL**

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **DP** ☐ Change ☐ Addition

NAME **Williams, BRENDA L**
STREET ADDRESS **350 N. Jog Rd.**
CITY-ST-ZIP **West Palm Bch, FL**

TITLE **DST** ☐ Change ☐ Addition

NAME **Pansy R. Upthegrove**
STREET ADDRESS **300 N. Jog Rd**
CITY-ST-ZIP **West Palm Bch, FL**

TITLE **D** ☐ Change ☐ Addition

NAME **Georgia E. DEffenbaugh**
STREET ADDRESS **5769 Coconut Blvd**
CITY-ST-ZIP **Royal Palm Beach, FL 33411**

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Georgia E. DEffenbaugh*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #