

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48620

FILED
May 19, 2005
Secretary of State

Entity Name: TABERNACLE AFRICAN UNIVERSAL CHURCH, INC.

Current Principal Place of Business:

3531 OLD KINGS RD
JACKSONVILLE, FL 32254 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 40583
JACKSONVILLE, FL 32202 US

New Mailing Address:

FEI Number: 59-3091878 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DAVIS, MARSHAL D
233 EAST BAY ST
STE 620
JACKSONVILLE, FL 32202 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KEYES, KUBINI V.,
Address: 2939 WEST FOURTH ST.
City-St-Zip: JACKSONVILLE, FL

Title: D () Delete
Name: KEYES, PAULINE,
Address: 4651 FREDERICKSBURG AVE.
City-St-Zip: JACKSONVILLE, FL

Title: D () Delete
Name: NEWSOME, ANTHONY
Address: 8711 NEWTON RD
City-St-Zip: JACKSONVILLE, FL 32216

Title: D () Delete
Name: NELSON, JAMES
Address: 446 BELFORT ST.
City-St-Zip: JACKSONVILLE, FL 32204

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: KUBINI V. KEYES

P

05/19/2005

Electronic Signature of Signing Officer or Director

_____ Date