FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

701026

(7)

TAMPA BAPTIST CHURCH OF TAMPA, FLORIDA, INC.

Principal Place of Business Mailing Address							6.611 616	11 milli aimis mil	111 Athit 1441
SLIGH & DIXON ST SLIGH & DIXON ST									
300 SLIGH AVE	EAST	300 SLIGH AVE EAST							
TAMPA FL 33604		TAMPA FL 33604-5543		3. Date Incorporated or Qualified 3a. Date of Last Report			eport		
						05/31/1960	'	04/22/199) 6
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		Ap	plied For
21		26			•	59-0651104			t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 A	7	
22		27				<u> </u>		Fee Re	
City & Stat	e	City & State			Election Campaign Financing Trust Fund Contribution		\$5.00 Added t		
Z ip	Country	28	Cou	ntrv					
24	25	⊢ ` ⊢	30	,		8. This corporation has liability for the Florida Statutes	Titangible		. 189.032,
24	9. Name and Address of Curren		1			10. Name and Address of New Re		***	
		······································		81	Name			···	
HORNUI	NG, ESTELLE O.		- 1	82	Street Add	iress (P.O. Box Number is Not Acceptab	رهار		
	ST JEAN STREET		BZ Street AC			rese (r.O. Dox realined le reor Adoption			
	FL 33604			83					
				84	City			85 Zip (Code
						•	FL	. ` `	
11. Pursuant office or i	to the provisions of Sections 617.050 registered agent, or both, in the State	2 and 617.1508, Florida Statute of Florida. Such change was a	s, the at uthorized	oove- d by i	named cor the corpora	poration submits this statement for the partion's board of directors. I hereby accept	urpose of of the app	changing its cintment as	s registered registered
agent. 1 a	ım familiar with, and accept the oblig	ations of, Section 617.0503, Flor	rida Stat	utes.	·		1		.
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable. (NOTE	: Registered	d Apen	i sionature requ	pirad when reinstating)	DATE		
12.	OFFICERS AN		13.			ADDITIONS/CHANGES TO OFFICE	ERS AND	DIRECTOR	S IN 12
TITLE	PD	DELETE	1.1 10	TLE				☐ Change	Addition
NAME	SANDERS, J. ROGER		1.2 NAME						
STREET ADDRESS	10707 CARROLL LAKE DR.		1.3 STREE		NDORESS				
CITY - ST - ZIP	TAMPA FL		1.4 CITY-		- ZIP			.,	
TITLE	SD	☐ DELETE	2.1 TI	TLE				Change	Addition
NAME	HORNUNG, ESTELLE O.		2.2 NAME						
STREET ADDRESS	125 WEST JEAN STREET		2.3 \$1	FREET A	ADDRESS				
CITY - ST - ZIP	TAMPA FL	L L OF LEVE		ITY-\$1	1-21P			Change	Addition
TITLE				3.1 TITLE				Change	☐ WOOHIOII
NAME	2908 WOODS END COURT	tan trade if a consumer and		3.2 NAME 3.3 STREET ADDRESS					
STREET ADDRESS	TAMPA FL								
CITY-ST-ZIP TITLE	IAMPA PL	DELETE	3.4. CITY-		1-20P	****		☐ Channe	Addition
NAME		better	4. 2 NAME					Contraction	
STREET ADDRESS			4.3 STREET ADDRES		ADDRESS				ļ
CITY-ST-ZIP			4.4 CITY-ST-ZIP		i i				
TITLE		DELETE	5.1 TITLE					Change	Addition
NAME		•	5.2 N				•		
STREET ADDRESS			5.3 S	TREET	address				
CITY-ST-ZIP			5.4 CITY-S		r-ZIP				
TITLE		DELETE	6.1 TITLE					Change	Addition
NAME			6.2 N	AME					
STREET ADDRESS			6.3 S	TREET	address				
CITY-ST-ZIP				ITY-SI			- 17 -		Lab -
44 Lelo horo	the cortifu that the information cumplic	or with this filling doos not avalif	u tar tha	AVA	mntian ntata	art in Section 110 07/3\/i\ Floride Statute	e Iturine	r commy that	מחז ב

information indicated on this annual report or supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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

ey. 2/12/97 (B) 285673

FILED

Feb 18 1997 8:00am

Secretary of State