

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 01, 2007 8:00 am**  
**Secretary of State**

02-01-2007 90035 028 \*\*\*\*61.25

DOCUMENT # 701354  
 1. Entity Name  
 FIRST BAPTIST CHURCH OF PINELLAS PARK.



Principal Place of Business  
 5495 PARK BOULEVARD  
 PINELLAS PARK, FL 33781

Mailing Address  
 5495 PARK BOULEVARD  
 PINELLAS PARK, FL 33781

40008497



2. Principal Place of Business - No P.O. Box #  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

01222007 Chg-NP CR2E037 (12/06)

City & State  
 Zip Country

4. FEI Number  
 59-6033537

Applied For  
 Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 STROUSE, JAY  
 8798 56TH WAY N  
 PINELLAS PARK, FL 33782

7. Name and Address of New Registered Agent  
 Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City FL Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *JAY STROUSE* DATE 1/29/07  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25**  
**Due by May 1, 2007**

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

**Make check payable to Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	CAROLL, RENE	
STREET ADDRESS	2226 46TH AVE N.	
CITY-ST-ZIP	SAINT PETERSBURG, FL 33714	
TITLE	T	<input type="checkbox"/> Delete
NAME	MILLS, JEFFREY	
STREET ADDRESS	5560 76TH AVE N.	
CITY-ST-ZIP	PINELLAS PARK, FL 33781	
TITLE	T	<input type="checkbox"/> Delete
NAME	STROUSE, JAY	
STREET ADDRESS	8798 56TH WAY N.	
CITY-ST-ZIP	PINELLAS PARK, FL 33782	
TITLE	T	<input type="checkbox"/> Delete
NAME	SMITH, MURRAY	
STREET ADDRESS	9047 SUNRISE DR	
CITY-ST-ZIP	LARGO, FL 33773	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Michael La Fave	
STREET ADDRESS	511 82nd Ave N	
CITY-ST-ZIP	ST Petersburg FL 33702	
TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Don Cunningham	
STREET ADDRESS	8848 56th Way N	
CITY-ST-ZIP	Pinellas Park FL 33782	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *JAY STROUSE* DATE 1/29/07  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #