## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#710642**

FILED Mar 12, 2005 Secretary of State

Entity Name: BARTOW FIRST ASSEMBLY OF GOD, INC.OF BARTOW, FLORIDA

**Current Principal Place of Business: New Principal Place of Business:** 915 SOUTH BROADWAY BARTOW, FL 33830 **Current Mailing Address: New Mailing Address:** 915 SOUTH BROADWAY BARTOW, FL 33830 FEI Number: 59-1851501 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TEDDER, MICHAEL D 160 E. HOOKER STREET BARTOW, FL 33830 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition GRINER, TIMOTHY GRINER, TIMOTHY Name: Name: 830 COPPERLIEF LANE Address: 830 COPPERLEAF LANE Address: BARTOW, FL 33830 City-St-Zip: City-St-Zip: BARTOW, FL 33830 Title: () Delete Title: () Change () Addition WALDORFF, GREG Name: Name: Address: 1765 HORIZON WAY Address: City-St-Zip: BARTOW, FL 33830 City-St-Zip: Title: () Delete Title: () Change () Addition BECK, CHRISTOPHER Name: Name: 1610 LAKESIDE DR Address: Address: City-St-Zip: BARTOW, FL 33830 City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: METHENY, KEVIN Name: 390 S STUART ST Address: Address: BARTOW, FL 33830 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition TEDDER, MICHAEL Name: Name: 160 E HOOKER ST Address: Address: City-St-Zip: BARTOW, FL 33830 City-St-Zip: Title: () Delete Title: () Change () Addition CROWLEY, JAMES Name: Name: Address: 6206 FORESTWOOD DR. W Address: LAKELAND, FL 33811 City-St-Zip: 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: MICHAEL D. TEDDER P 03/12/2005