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Jan 23 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 735157 (0)

1. Corporation Name

WESTGATE CHRISTIAN CHURCH OF TAMPA, INC.

Principal Place of Business

Mailing Address

8303 JACKON SPRGS RD.
TAMPA FL 336158303 JACKON SPRGS RD.
TAMPA FL 33615-2812

3. Date Incorporated or Qualified

03/05/1976

3a. Date of Last Report

01/29/1996

4. FEI Number

59-1713982

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐ \$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BROWNING, TOM
8417 WOODBRIER COURT
TAMPA FL 33615

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature: Typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-stating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME BROWNING, TOM
STREET ADDRESS 8417 WOODBRIER COURT
CITY-ST-ZIP TAMPA, FL 00000 ☐ DELETE11 TITLE ☐ Change ☐ Addition
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIPTITLE S
NAME CAMPBELL, PHYLLIS J.
STREET ADDRESS 1112 SOUTHSIDE DR.
CITY-ST-ZIP BRANDON FL ☐ DELETE21 TITLE ☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIPTITLE DC
NAME SMITH, ROY J
STREET ADDRESS 6609 MASCOTTE
CITY-ST-ZIP TAMPA, FL 00000 ☐ DELETE31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIPTITLE T
NAME BALSLEY, JOYCE A.
STREET ADDRESS 4422 PRESCOTT
CITY-ST-ZIP TAMPA FL ☐ DELETE41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIPTITLE D
NAME CAMPBELL, DOUGLAS B
STREET ADDRESS 1112 SOUTHSIDE DR.
CITY-ST-ZIP BRANDON FL ☐ DELETE51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIPTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

14. I do 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Joyce A. BALSLEY

1-13-97

(813)

839-1593

0048247

CR2E037 (9/96)