FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

(0)

WESTGATE CHRISTIAN CHURCH OF TAMPA, INC.

Principal Place of Business	Mailing Address	
8303 JACKON SPRGS RD. TAMPA FL 33615	8303 JACKON SPRGS RD. TAMPA FL 33615	
	_	
2. Principal Place of Business	2a. Mailing Address	

FILED Jan 29 1996 8:00am Secretary of State



3a. Date of Last Report 01/26/1995

Applied For

Not Applicable

3. Date Incorporated or Qualified

03/05/1976

59-1713982

4. FEI Number

Sulte, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional Fee Regulred		
City & Stato	City & State		6. Election Campaign Financing \$5.00 May Re		
23	28		Trust Fund Contribution Added to Fees		
Zip Country	Zip	Country	8. This corporation has liability for intangible tax under s. 199.032,		
24 25	[29]	30	Florida Statutes Yes No		
9, Name and Addres	s of Current Registered Agent	641 11	10. Name and Address of New Registered Agent		
		61 Name			
BROWNING, TOM 8417 WOODBRIER COURT TAMPA FL 33615		62 Street	Address (P.O. Box Number is Not Acceptable)		
		83			
		63			
		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 Symbolic typics or product response of egyndrest legyndrators (NOTE Registered Agent signature required when revistating) DATE					
	EICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
THILE D	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition		
HAME BROWNING, TOM		1.2 NAME			
STREET ADDRESS 8417 WOODBRIER	COURT	1.3 STREET ADDRESS			
CITY-ST-ZIP TAMPA,FL 00000		1.4 CITY-ST-ZIP			
TIFLE S	DELETE	2.1 TITLE	☐ Change ☐ Addition		
NAME CAMPBELL, PHYLL		2.2 NAME			
STREET ADDRESS 1112 SOUTHSIDE	DR.	2.3 STREET ADDRESS			
CITY-ST-ZIP BRANDON FL		2.4 Ci1Y-SI-ZiP			
TOTLE DC	□ DETE1E	3.1 TITLE	☐ Change ☐ Addition		
NAME SMITH, ROY J		3.2 NAME			
STREET ADDRESS 6609 MASCOTTE		3.3 STREET ADDRESS			
CITY-ST-ZIP TAMPA,FL 00000	Floticit	3.4. CITY-ST-ZIP			
TITLE T	☐ DELETE	4 1 TITLE	Change Addition		
NAME BALSLEY, JOYCE A	٧.	4 2 NAME			
STREET ADORESS 4422 PRESCOTT		4.3 STREET ADDRESS			
CITY-S1-ZIP TAMPA FL	DELETE	4.4 CHY-ST-ZIP 5.1 TITLE	Change Addition		
, , ,		52 NAME			
NAME CAMBPELL, DOUG					
STREET ADDRESS 1112 SOUTHSIDE	un.	5 3 STREET ADDRESS			
CITY-ST-ZIP BRANDON FL	□ DELETE	54 CITY-ST-ZIP 61 TITLE	Change Addition		
NAME		62 NAME	T smaller I required		
STREET ADDRESS		6.3 STREET ADDRESS			
1					
CITY-ST-ZIP 14. I do hereby certify that the informati	on supplied with this filing is voluntarily furn	6.4 CITY - ST-ZIP ished and does not qua	Lalify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further		

oath, that an an officer or director of the corporation or the receiver or trustee en appears in Block 12 or Block 13 if changed, or on an attachment with an address.