

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 735157

1. Corporation Name

WESTGATE CHRISTIAN CHURCH OF TAMPA, INC.

Principal Place of Business

8303 JACKON SPRGS RD.  
TAMPA FL 33615

Mailing Address

8303 JACKON SPRGS RD.  
TAMPA FL 33615

FILED  
Mar 26, 1999 8:00 am  
Secretary of State

03-26-1999 90030 015 \*\*\*161.25



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified

03/05/1976

4. FEI Number

59-1713982

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

9. Name and Address of Current Registered Agent

CORNETT, WALLACE R.  
2405 FOREST CREST CIRCLE  
LUTZ FL 33549

10. Name and Address of New Registered Agent

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE  
NAME CORNETT, WALLACE R.  
STREET ADDRESS 2405 FOREST CREST CIRCLE  
CITY-ST-ZIP LUTZ FL 33549

TITLE CD ☐ DELETE  
NAME DOYLE, MILLER L.  
STREET ADDRESS 12301 KELLY LANE  
CITY-ST-ZIP THONOTOSASSA FL 33592

TITLE S ☐ DELETE  
NAME WHITE, DAWN T.  
STREET ADDRESS 8717 SOMERSWORTH PLACE  
CITY-ST-ZIP TAMPA, FL 00000 33634

TITLE T ☒ DELETE  
NAME BALSLEY, JOYCE A.  
STREET ADDRESS 4422 PRESCOTT  
CITY-ST-ZIP TAMPA FL 33616

TITLE D ☐ DELETE  
NAME WHITE, SCOTT  
STREET ADDRESS 8717 SOMERSWORTH PLACE  
CITY-ST-ZIP TAMPA FL 33634

TITLE D ☐ DELETE  
NAME BALSLEY, KENNETH D.  
STREET ADDRESS 4422 PRESCOTT  
CITY-ST-ZIP TAMPA FL 33616

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE T ☐ Change ☒ Addition  
1.2 NAME Dolores Cornett  
1.3 STREET ADDRESS 2405 Forest Crest Circle  
1.4 CITY-ST-ZIP Lutz, FL 33549

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I 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, with all other like empowered.

SIGNATURE: WALLACE R. CORNETT

2/14/99 (813) 978-0138

SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (1/98)