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CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 30 AM 10: 48

DOCUMENT # **N10350** (9)

1. Corporation Name

TAMPA BAY CHURCH OF RELIGIOUS SCIENCE, INC.

Principal Place of Business	Mailing Address
4600 E BUSCH BLVD. TAMPA FL 33617-3019 US	4600 E BUSCH BLVD. TAMPA FL 33617-3019 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/22/1985
3a. Date of Last Report: 03/16/1994
4. FEI Number: 59-2594430 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

9. Name and Address of Current Registered Agent

LOPEZ, DAVID
3027 W. KENNEDY BLVD.
TANPA FL 33609

10. Name and Address of New Registered Agent

81 Name: [redacted] L.J. BALTHAZOR
82 Street Address (P.O. Box Number is Not Acceptable): 4600 E. BUSCH BLVD.
83
84 City: TAMPA FL 85 Zip Code: 33617-3019

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: L.J. BALTHAZOR — Signature, typed or printed name of registered agent and title if applicable
L.J. Balthazor — (NOTE: Registered Agent signature required when reinstating)
DATE: 3-22-95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	11 TITLE	T ☐ Change ☒ Addition
NAME	SWANSON, CAROL	12 NAME	L.J. BALTHAZOR
STREET ADDRESS	2801 PALAMORE DR	13 STREET ADDRESS	2112 LAND O LAKES BLVD.
CITY-ST-ZIP	TAMPA FL	14 CITY-ST-ZIP	LUTZ, FLA. 33549
TITLE	V	21 TITLE	☐ Change ☐ Addition
NAME	DREHER, STEPHEN	22 NAME	
STREET ADDRESS	4475 W HUMPHREY	23 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL	24 CITY-ST-ZIP	
TITLE	T	31 TITLE	☐ Change ☐ Addition
NAME	TINKHAM, DORIS	32 NAME	
STREET ADDRESS	13103 N OREGON	33 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL	34 CITY-ST-ZIP	
TITLE	S	41 TITLE	☐ Change ☐ Addition
NAME	BODDEN, APRIL	42 NAME	
STREET ADDRESS	5117 ARBOR PT CIR #604	43 STREET ADDRESS	
CITY ST ZIP	LUTZ FL	44 CITY-ST-ZIP	
TITLE	D	51 TITLE	☐ Change ☐ Addition
NAME	SWANSON, CAROL	52 NAME	
STREET ADDRESS	2801 PALAMORE DRIVE	53 STREET ADDRESS	
CITY ST ZIP	TAMPA FL	54 CITY ST ZIP	
TITLE	D	61 TITLE	☐ Change ☐ Addition
NAME	CORREIA, RANDY	62 NAME	
STREET ADDRESS	10904 BENTREE PL	63 STREET ADDRESS	
CITY ST ZIP	TAMPA FL	64 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: L.J. Balthazor (L.J. BALTHAZOR) 3-22-95 813 985 2428
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0064425