## 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N12232

FILED Mar 27, 2003 Secretary of State

Entity Name: CORNERSTONE COMMUNITY CHURCH OF TAMPA, INC.

Current Principal Place of Business: New Principal Place of Business:

15201 ROOSEVELT BLVD. 142 5TH AVE N

#109 ST. PETERSBURG, FL 33701 US

CLEARWATER, FL 33760 US

Current Mailing Address: New Mailing Address:

PO BOX 17671 142 5TH AVE N

TAMPA, FL 33682 ST. PETERSBURG, FL 33701 US

FEI Number: 59-2822563 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:

GHIOTTO, JEFFREY R STEVENS, JIM 17602 WHISTLING LN. 142 5TH AVE N

LUTZ, FL 33549 ST. PETERSBURG, FL 33701

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: JIM STEVENS 03/27/2003

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD ( ) Delete Title: VPT (X) Change ( ) Addition

Name: GHIOTTO, JEFFERY R. Name: STEVENS, JIM
Address: 17602 WHISTLING LN Address: 142 5TH AVE N

City-St-Zip: LUTZ, FL 33549 City-St-Zip: ST. PETERSBURG, FL 33701

Title: STD ( ) Delete Title: PSD (X) Change ( ) Addition Name: STEWART, DAVID Name: PAYNE, LONNITTA

Address: 114 KENWOOD AVE Address: 142 5TH AVE N

City-St-Zip: NOKOMIS, FL 34275 City-St-Zip: ST.PETERSBURG, FL 33701

Title:D () DeleteTitle:D (X) Change () AdditionName:FALLIN, RICKYName:BUTLER, PATRICIAAddress:4803 OKARA RDAddress:142 5TH AVE N

City-St-Zip: TAMPA, FL 33617 City-St-Zip: ST. PETERSBURG, FL 33701

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: JIM STEVENS VP 03/27/2003