

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N12232

FILED
Apr 01, 2003
Secretary of State

Entity Name: CORNERSTONE COMMUNITY CHURCH OF TAMPA, INC.

Current Principal Place of Business:

142 5TH AVE N
ST. PETERSBURG, FL 33701 US

New Principal Place of Business:

Current Mailing Address:

142 5TH AVE N
ST. PETERSBURG, FL 33701 US

New Mailing Address:

FEI Number: 59-2822563

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEVENS, JIM
142 5TH AVE N
ST. PETERSBURG, FL 33701

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VPT () Delete
Name: STEVENS, JIM
Address: 142 5TH AVE N
City-St-Zip: ST. PETERSBURG, FL 33701

Title: PSD () Delete
Name: PAYNE, LONNITTA
Address: 142 5TH AVE N
City-St-Zip: ST. PETERSBURG, FL 33701

Title: D () Delete
Name: BUTLER, PATRICIA
Address: 142 5TH AVE N
City-St-Zip: ST. PETERSBURG, FL 33701

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPSD (X) Change () Addition
Name: STEVENS, JIM
Address: 142 5TH AVE N
City-St-Zip: ST. PETERSBURG, FL 33701

Title: PD (X) Change () Addition
Name: PAYNE, LONNITTA
Address: 142 5TH AVE N
City-St-Zip: ST. PETERSBURG, FL 33701

Title: TD (X) Change () Addition
Name: ENRIQUE, DE LA PIEDRA
Address: 142 5TH AVE N
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

VPSD

04/01/2003

Electronic Signature of Signing Officer or Director

Date