

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28106

FILED  
May 11, 2010  
Secretary of State

**Entity Name:** SOUTH BRANDON BAPTIST CHURCH, INC.

**Current Principal Place of Business:**

4929 BELL SHOALS ROAD  
VALRICO, FL 33596 US

**New Principal Place of Business:**

**Current Mailing Address:**

4929 BELL SHOALS ROAD  
VALRICO, FL 33596 US

**New Mailing Address:**

**FEI Number:** 59-2905564      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

ACKERMAN, KEN  
5313 LAUREL POINTE DRIVE  
VALRICO, FL 33594 US

**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: TD  
Name: THOMAS, CHRISTOPHER  
Address: 16150 BOYETTE ROAD  
City-St-Zip: RIVERVIEW, FL 33569

Title: TD  
Name: TAFLINGER, MICHAEL  
Address: 5935 SANDHILL RIDGE DRIVE  
City-St-Zip: LITHIA, FL 33547

Title: CSM  
Name: ACKERMAN, KEN  
Address: 5313 LAUREL POINT DRIVE  
City-St-Zip: VALRICO, FL 33594

Title: D  
Name: TAFLINGER, KATHIE  
Address: 5935 SANDHILL RIDGE DRIVE  
City-St-Zip: LITHIA, FL 33547

I hereby 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 all other like empowered.

SIGNATURE: KATHIE TAFLINGER

D

05/11/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date