

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002053

FILED  
Apr 10, 2008  
Secretary of State

Entity Name: SHILOH COVENANT FELLOWSHIP OF TAMPA BAY INC.

**Current Principal Place of Business:**

12622 MEMORIAL HWY.  
TAMPA, FL 33635

**New Principal Place of Business:**

8660 IDIAN RIDGE TRAIL  
LAKELAND, FL 33610

**Current Mailing Address:**

12622 MEMORIAL HWY.  
TAMPA, FL 33635

**New Mailing Address:**

P.O. BOX 205  
SUMMERVILLE, SC 29484

FEI Number: 03-0593883

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

BIRD, MERRY  
12622 MEMORIAL HWY  
TAMPA, FL 33635 US

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

BIRD, MERRY  
8660 INDIAN RIDGE TRAIL  
LAKELAND, FL 33610 US

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: MERRY BIRD

04/10/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: BIRD, MERRY  
Address: 12622 MEMORIAL HWY.  
City-St-Zip: TAMPA, FL 33635

Title: DVP ( ) Delete  
Name: BIRD, LANCE  
Address: 12622 MEMORIAL HWY.  
City-St-Zip: TAMPA, FL 33635

Title: DS ( ) Delete  
Name: RAU, SUSAN  
Address: 2006 CEMETARY RD  
City-St-Zip: HOLIDAY, FL 34690

Title: DT ( ) Delete  
Name: BIRD, JOHN W  
Address: 4002 SOUTH MANHATTEN AVE. APT. 54  
City-St-Zip: TAMPA, FL 33611

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

Title: DP (X) Change ( ) Addition  
Name: BIRD, MERRY  
Address: 8660 INDIAN RIDGE TRAIL  
City-St-Zip: LAKELAND, FL 33610

Title: DVP (X) Change ( ) Addition  
Name: BIRD, LANCE  
Address: 8660 INDIAN RIDGE TRAIL  
City-St-Zip: LAKELAND, FL 33610

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MERRY BIRD

RA

04/10/2008

Electronic Signature of Signing Officer or Director

Date