

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006577

FILED
Jan 08, 2004
Secretary of State**Entity Name:** BLOOMINGDALE OAKS BAPTIST CHURCH OF VALRICO, FLA., INC.**Current Principal Place of Business:**1653 BLOOMINGDALE AVE
VALRICO, FL 33594**New Principal Place of Business:****Current Mailing Address:**1653 BLOOMINGDALE AVE
VALRICO, FL 33594**New Mailing Address:****FEI Number:** 59-3356843**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ODOM, JOHN
1653 BLOOMINGDALE AVE
VALRICO, FL 33594**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: PD () Delete
Name: ODOM, JOHN
Address: 12530 RIVERBIRCH DR.
City-St-Zip: RIVERVIEW, FL 33569

Title: VD () Delete
Name: ABBOTT, COURT
Address: 1401 VIOLA DRIVE
City-St-Zip: BRANDON, FL 33511

Title: D (X) Delete
Name: SPOONER, ROBERT
Address: 2203 GREENHILLS DRIVE
City-St-Zip: VALRICO, FL 33594

Title: D (X) Delete
Name: MURRAY, STEPHEN
Address: 18009 MISTY BLUE LANE
City-St-Zip: TAMPA, FL 33647

Title: D () Delete
Name: HAFER, ROXANE
Address: 1905 CANTERBURY LANE E-6
City-St-Zip: SUN CITY CENTER, FL 33573

Title: D () Delete
Name: RECENELLO, JOYCE
Address: 923 RIDGE HAVEN DR.
City-St-Zip: BRANDON, FL 33511

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: () Change () Addition
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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 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: COURT ABBOTT

VD

01/08/2004

Electronic Signature of Signing Officer or Director

Date