

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006577

FILED  
Apr 13, 2008  
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 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: PD ( ) Delete  
Name: ODOM, JOHN  
Address: 15732 PHOEBE PARK AVE  
City-St-Zip: LITHIA, FL 33547

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

Title: D ( ) Delete  
Name: HAFFER, 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

Title: D (X) Delete  
Name: WHEELER, JOSHUA  
Address: 207 EXCALIBUR COURT  
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: D (X) Change ( ) Addition  
Name: WHEELER, JOSHUA  
Address: 207 EXCALIBUR COURT  
City-St-Zip: BRANDON, FL 33511

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: JOHN ODOM

PD

04/13/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date