

**2017 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# 702054

**Entity Name:** BELL SHOALS BAPTIST CHURCH OF BRANDON, INC.**Current Principal Place of Business:**2102 BELL SHOALS RD  
BRANDON, FL 33511**Current Mailing Address:**ATTN: DIRECTOR OF ACCTG  
2102 BELL SHOALS RD  
BRANDON, FL 33511 US**FEI Number:** 59-1320590**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KOSIENIAK, PERRY  
2810 ST CLOUD OAKS DR  
VALRICO, FL 33594-3839 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:** PERRY KOSIENIAK

09/28/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            TREASURER  
Name            WRIGHT, ALISON  
Address        1838 THOMPSON RD  
City-State-Zip: LITHIA FL 33547-2830

Title            SECRETARY  
Name            KOSIENIAK, PERRY  
Address        2810 ST CLOUD OAKS DR  
City-State-Zip: VALRICO FL 33594-3839

Title            TRUSTEE  
Name            GUNN, DONALD  
Address        1002 S MOUNT CARMEL RD  
City-State-Zip: BRANDON FL 33511-6735

Title            TRUSTEE  
Name            COLLIS, DAN E  
Address        1102 E COLLEGE AV  
City-State-Zip: RUSKIN FL 33570-5014

Title            TRUSTEE  
Name            GARRETT, FRANK JR.  
Address        1826 VISTA RIVER DR  
City-State-Zip: VALRICO FL 33596-7861

Title            TRUSTEE  
Name            CHADWELL, DAVID  
Address        702 CITRUS WOOD LN  
City-State-Zip: VALRICO FL 33594-3723

Title            CHAIRMAN, TRUSTEE  
Name            NICKERSON, C REES  
Address        2401 CATTLEMAN DR  
City-State-Zip: BRANDON FL 33511-2120

*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:** PERRY KOSIENIAK**SECRETARY**

09/28/2017

Electronic Signature of Signing Officer/Director Detail

Date