

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 724564

**FILED**  
**Mar 15, 2016**  
**Secretary of State**  
**CC2269312111**

**Entity Name:** FIRST BAPTIST CHURCH OF PALM RIVER, INC.

**Current Principal Place of Business:**

5415 PALM RIVER ROAD  
TAMPA, FL 33619

**Current Mailing Address:**

BELL SHOALS BAPTIST CHURCH OF BRANDON, INC.  
2102 BELL SHOALS ROAD ATTN: FINANCE  
BRANDON, FL 33511 US

**FEI Number:** 59-6513401

**Certificate of Status Desired:** No

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

KOSIENIAK, PERRY  
2810 ST CLOUD OAKS DRIVE  
VALRICO, FL 33594 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

03/15/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	TREASURER
Name	WRIGHT, ALISON
Address	1838 THOMPSON ROAD
City-State-Zip:	LITHIA FL 33547
Title	TRUSTEE
Name	GUNN, DONALD
Address	1002 S MOUNT CARMEL ROAD
City-State-Zip:	BRANDON FL 33511-6735
Title	TRUSTEE
Name	GARRETT, FRANK JR.
Address	1826 VISTA RIVER DRIVE
City-State-Zip:	VALRICO FL 33596
Title	CHAIRMAN, TRUSTEE
Name	NICKERSON, C REES
Address	2401 CATTLEMAN DRIVE
City-State-Zip:	BRANDON FL 33511

Title	SECRETARY
Name	KOSIENIAK, PERRY
Address	2810 SAINT CLOUD OAKS DRIVE
City-State-Zip:	VALRICO FL 33594
Title	TRUSTEE
Name	COLLIS, DAN E
Address	1102 E COLLEGE AVENUE
City-State-Zip:	RUSKIN FL 33570
Title	TRUSTEE
Name	CHADWELL, DAVID
Address	702 CITRUS WOOD LANE
City-State-Zip:	VALRICO FL 33594
Title	DEACON, CHAIRMAN
Name	BRYANT, HOWARD T
Address	3618 DELARUA PLACE
City-State-Zip:	VALRICO FL 33596-8456

**Continues on page 2**

*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

**REGISTERED AGENT**

03/15/2016

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title VC, DEACON  
Name MILLER, DENNIS SR.  
Address 1405 DUMONT DRIVE  
City-State-Zip: VALRICO FL 33596-7142