

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 760824

Entity Name: COUNTRYSIDE CHRISTIAN CENTER, INC.

Current Principal Place of Business:

1850 N MCMULLEN BOOTH RD
CLEARWATER, FL 33759

Current Mailing Address:

1850 N MCMULLEN BOOTH RD
CLEARWATER, FL 33759 US

FEI Number: 59-2167973

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DAVIS, GLENN A
1850 N MCMULLEN BOOTH RD
CLEARWATER, FL 33759 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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title DIRECTOR
Name TENNANT, RICHARD
Address 1850 N MCMULLEN BOOTH RD.
City-State-Zip: CLEARWATER FL 33759

Title DIRECTOR
Name JACKSON, MATTHEW
Address 1850 N MCMULLEN BOOTH RD.
City-State-Zip: CLEARWATER FL 33759

Title DIRECTOR
Name MITCHELL, MARK
Address 1850 N MCMULLEN BOOTH RD.
City-State-Zip: CLEARWATER FL 33759

Title DIRECTOR
Name BARBER, WAYNE
Address 1850 N MCMULLEN BOOTH RD.
City-State-Zip: CLEARWATER FL 33759

Title DIRECTOR
Name BOYCE, RON
Address 1850 N MCMULLEN BOOTH RD.
City-State-Zip: CLEARWATER FL 33759

Title DIRECTOR
Name CALVERT, JIM
Address 1850 N MCMULLEN BOOTH RD.
City-State-Zip: CLEARWATER FL 33759

Title DIRECTOR
Name MAZZIPICA, PAUL
Address 1850 N MCMULLEN BOOTH RD.
City-State-Zip: CLEARWATER FL 33759

Title DIRECTOR
Name TELLONE, SHAWN
Address 1850 N MCMULLEN BOOTH RD.
City-State-Zip: CLEARWATER FL 33759

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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: RICHARD TENNANT

DIRECTOR

03/10/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name ALTMAN, CRAIG
Address 1850 N MCMULLEN BOOTH RD.
City-State-Zip: CLEARWATER FL 33759