

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2004 08:00 AM
Secretary of State

DOCUMENT # 700946	
1. Entity Name BAYVISTA CHURCH OF CHRIST INC	

Principal Place of Business 5460 7TH STREET SOUTH SAINT PETERSBURG, FL 33705	Mailing Address 5460 7TH STREET SOUTH SAINT PETERSBURG, FL 33705
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04202004 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-2382217	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent WARNOCK, FRED D. 5460 7TH ST. S. 853 69TH AVE. S. ST. PETERSBURG, FL 33705
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2004	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE STD	NAME WARNOCK, FRED D.
STREET ADDRESS 5460 7TH ST. S.	CITY- ST- ZIP ST. PETERSBURG, FL 33705
TITLE D	NAME MCROY, WILLIAM
STREET ADDRESS 1221 FARUNISO ST. S.	CITY- ST- ZIP SAINT PETERSBURG, FL 33712
TITLE VD	NAME JENKINS, GRANDERSON
STREET ADDRESS P.O. BOX 15068	CITY- ST- ZIP ST PETERSBURG, FL 33733
TITLE VD	NAME POLLARD, LORENZO
STREET ADDRESS 2720 4TH AVE N	CITY- ST- ZIP SAINT PETERSBURG, FL 33713
TITLE PD	NAME LATELERS, MILTON
STREET ADDRESS 355 55TH AVENUE SOUTH	CITY- ST- ZIP SAINT PETERSBURG, FL 33705
TITLE	NAME
STREET ADDRESS	CITY- ST- ZIP

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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Fred D. Warnock STD **4/20/2004** **(727) 866-0300**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #