2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 04, 2009
Secretary of State

DOCUMENT# 701808

Entity Name: THE FIRST BAPTIST CHURCH OF TEMPLE TERRACE, FLORIDA, INC.

Current Principal Place of Business:

10002 56TH STREET
TEMPLE TERRACE, FL 33617

New Principal Place of Business:

Current Mailing Address:

10002 56TH STREET
TEMPLE TERRACE, FL 33617

New Mailing Address:

FEI Number: 59-6045892 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MCNEAL, GARY
4612 SERENA DR
TAMPA, FL 33617 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: CULBREATH, STEVE
Address: 205 S. GLEN ARVIN
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: S ( ) Delete
Name: BUCKLEY, BILL
Address: 9237 KINGSRIDGE DRIVE
City-St-Zip: TEMPLE TERRACE, FL 33637

Title: D ( ) Delete
Name: CULBREATH, STEVE
Address: 205 S GLEN ARVIN
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: D ( ) Delete
Name: MOORE, CRAIG
Address: 528 GERRARD DRIVE
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: D ( ) Delete
Name: TOMASINO, PAUL
Address: 12301 N. 5SND ST
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: D ( ) Delete
Name: GRAY, GENE
Address: 9020 NAVAJO AVE
City-St-Zip: TAMPA, FL 33637

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: GOVIN, RON
Address: 6821 BLUFFS BOULEVARD
City-St-Zip: TEMPLE TERRACE, FL 33617

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: STEVE CULBREATH PD 03/04/2009
Electronic Signature of Signing Officer or Director — Date