

**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 30, 2006  
Secretary of State**

DOCUMENT# 703744

Entity Name: BIBLE FELLOWSHIP OF LARGO, INC.

**Current Principal Place of Business:**

4670 E BAY DR  
CLEARWATER, FL 33765

**New Principal Place of Business:**

**Current Mailing Address:**

4670 E BAY DR  
CLEARWATER, FL 33765

**New Mailing Address:**

FEI Number: 59-1285907      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BRYANT, CLIMON D  
7001-142 AVE N #277  
LARGO, FL 33771      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: D      ( ) Delete  
Name: BRUNO, MARY LOU,  
Address: 1881 HERCULES AVE., #1201  
City-St-Zip: CLEARWATER, FL

Title: CP      ( ) Delete  
Name: TOBIN, NANCY  
Address: 1785 OWEN DR  
City-St-Zip: CLEARWATER, FL 33759

Title: DT      ( ) Delete  
Name: HERRING, COLLEEN  
Address: 6700-150TH AVE NORTH #349  
City-St-Zip: CLEARWATER, FL 33765

Title: D      ( ) Delete  
Name: MANDAKUNIS, CHRIS D  
Address: 14175 JEAN ST SW  
City-St-Zip: LARGO, FL 33774

Title: D      ( ) Delete  
Name: MILES, CLAIRE  
Address: 115427 BRISTOL CIR W  
City-St-Zip: CLEARWATER, FL 33764

**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:

I hereby certify that the information supplied with this filing does not qualify for the 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: MARY LOU BRUNO

CP

04/30/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date