## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 704243** 

FILED Apr 09, 2008 Secretary of State

Entity Name: ELIM TEMPLE HOLDING COMPANY, INC.

Current Principal Place of Business: New Principal Place of Business:

5210 BAYSHORE BLVD. TAMPA, FL 33611

Current Mailing Address: New Mailing Address:

4214 W. NORTH TAMPA, FL 33609

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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

HEWELL, OLIVIA E MENENDEZ, YOLANDA C 8137 ELIZABETH LANE 918 CIMMERON DR LARGO, FL 33777 US TAMPA, FL 336031728 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: YOLANDA C MENENDEZ 04/09/2008

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:PD () DeleteTitle:PD (X) Change () AdditionName:HEWELL, OLIVIA EName:MENENDEZ, YOLANDA CAddress:8137 ELIZABETH LANEAddress:918 CIMMERON DR

Address: 8137 ELIZABETH LANE Address: 918 CIMMERON DR
City-St-Zip: LARGO, FL 337771352 City-St-Zip: TAMPA, FL 336031728

Title: VPD ( ) Delete Title: VPD (X) Change ( ) Addition Name: MENENDEZ, YOLANDA Name: YOUNG, ELLEN G

 Address:
 918 CIMMERON DRIVE
 Address:
 P O BOX 522

 City-St-Zip:
 TAMPA, FL 336031728
 City-St-Zip:
 THONOTOSASSA, FL 335920522

Title: SD () Delete Title: SD (X) Change () Addition Name: YOUNG, ELLEN G Name: EDWARDS, JANE M

Address: POB 522 Address: 12207 GLENCLIFF CIRCLE
City-St-Zip: THONOTOSASSA, FL 335920522 City-St-Zip: TAMPA, FL 336262541

Name: EDWARDS, JANE M Name: HILTS, DOREEN

Address: 12207 GLENCLIFF CIRCLE Address: 5979 BAY LAKE DRIVE N

City-St-Zip: TAMPA, FL 336262541 City-St-Zip: ST PETERSBURG, FL 337083540

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: YOLANDA C MENENDEZ PD 04/09/2008