

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704884

FILED
Mar 29, 2009
Secretary of State

Entity Name: SECOND CHURCH OF CHRIST, SCIENTIST, TAMPA, FLORIDA, INC.

Current Principal Place of Business:

1310 WEST LINEBAUGH AVE.
TAMPA, FL 33612 US

New Principal Place of Business:

Current Mailing Address:

1310 WEST LINEBAUGH AVE.
TAMPA, FL 33612 US

New Mailing Address:

FEI Number: 59-6145046

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRINK, CHARLES W
4228 GLEN HAVEN LN
TAMPA, FL 33618 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: ATTEBERRY, JUDY
Address: 19113 WEYMOUTH DR
City-St-Zip: LAND O LAKES, FL 34639

Title: D () Delete
Name: CHRISENBERRY, LORRAINE
Address: 4811 EVENHART DR
City-St-Zip: LAND O LAKES, FL 34639

Title: T () Delete
Name: BRINK, CHARLES
Address: 4228 GLEN HAVEN LANE
City-St-Zip: TAMPA, FL 336187538

Title: D () Delete
Name: BRINK, SHARON
Address: 7228 GLEN HAVEN LANE
City-St-Zip: TAMPA, FL 33618

Title: CD () Delete
Name: HENNESSEY, BETTY
Address: 5414 STORM RD
City-St-Zip: LUTZ, FL 33558

Title: D () Delete
Name: DE MACARTY, GERRY
Address: 8512 OLEANDER FLOWER LANE #102C
City-St-Zip: TAMPA, FL 33614

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: CHATTERTON, MARLENE
Address: 15402 NORTH FLORIDA AVE.
City-St-Zip: TAMPA, FL 33613

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

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

Title: CD (X) Change () Addition
Name: HENNESSEY, BILL
Address: 5414 STORM RD
City-St-Zip: LUTZ, FL 33558

Title: D (X) Change () Addition
Name: JOYCE, BARBARA
Address: 4046 PRIORY CIRCLE
City-St-Zip: TAMPA, FL 33618

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: LORRAINE CHRISENBERRY

CLER

03/29/2009

Electronic Signature of Signing Officer or Director

Date