

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 706660

FILED
Jan 21, 2008
Secretary of State

Entity Name: FIRST BAPTIST CHURCH OF LINCOLN GARDENS, INC.

Current Principal Place of Business:

4025 W. PALMETTO ST.
TAMPA, FL 33607 US

New Principal Place of Business:

Current Mailing Address:

P.O BOX 4897
TAMPA, FL 336774897 US

New Mailing Address:

FEI Number: 59-3345511

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDERSON, GAIL A
8414 DEL REY CT
APT 342
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: V () Delete
Name: CRAWFORD, CASSIUS
Address: 6329 GONDOLA DRIVE
City-St-Zip: TAMPA, FL 33605

Title: T () Delete
Name: ANDERSON, GAIL A
Address: 8414 DEL REY COURT APT 342
City-St-Zip: TAMPA, FL 33617

Title: S () Delete
Name: ROBINSON, LOIS
Address: 7807 PARISH PLACE
City-St-Zip: TAMPA, FL 33619

Title: T () Delete
Name: ROBERTSON, WILSON
Address: 4221 W. ARCH ST
City-St-Zip: TAMPA, FL 33607

Title: P () Delete
Name: STEVENS, JAMES
Address: 3405 EAST JEAN ST
City-St-Zip: TAMPA, FL 33610

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 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: ANNIE MCKENZIE

CLER

01/21/2008

Electronic Signature of Signing Officer or Director

Date