

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709093

FILED
Apr 16, 2008
Secretary of State

Entity Name: EASTSIDE BAPTIST CHURCH OF PUNTA GORDA, FLORIDA INCORPORATED

Current Principal Place of Business:

6220 GOLF COURSE BLVD.
PUNTA GORDA, FL 33982

New Principal Place of Business:

Current Mailing Address:

6220 GOLF COURSE BLVD.
PUNTA GORDA, FL 33982

New Mailing Address:

FEI Number: 59-2316468

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUDSON, LARRY PD
6826 SW BELVOIR DRIVE
ARCADIA, FL 34266 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: HEADRICK, BOB
Address: 1315 NARRANJA ST
City-St-Zip: PUNTA GORDA, FL 33950

Title: D () Delete
Name: CHEATHAM, ALTON
Address: 18151 WILD PEPPER CT.
City-St-Zip: PUNTA GORDA, FL 33982

Title: D () Delete
Name: POWELL, CARL
Address: 6366 ELLIOTT ST
City-St-Zip: PUNTA GORDA, FL 33950

Title: PD () Delete
Name: HUDSON, LARRY
Address: 6826 SW BELVOIR DR.
City-St-Zip: ARCADIA, FL 34266

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:

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: SUZANNE PRICE

TRES

04/16/2008

Electronic Signature of Signing Officer or Director

Date