

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709641

FILED
Apr 30, 2008
Secretary of State

Entity Name: BAYSIDE COMMUNITY CHURCH OF GOD, INC.

Current Principal Place of Business:

3380 STATE ROAD 580
SAFETY HARBOR, FL 34695

New Principal Place of Business:

Current Mailing Address:

3380 STATE ROAD 580
SAFETY HARBOR, FL 34695

New Mailing Address:

FEI Number: 59-1781112 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLOOM, JOHN E
2671 SABAL SPRINGS CIRCLE
#105
CLEARWATER, FL 33761 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: PD () Delete
Name: BLOOM, JOHN E
Address: 2671 SABAL SPRINGS CIRCLE #105
City-St-Zip: CLEARWATER, FL 33761

Title: D () Delete
Name: BABER, DOUGLAS
Address: 2049 NUGGET DR.
City-St-Zip: CLEARWATER, FL 33755

Title: T () Delete
Name: RAMBAUM, WILLIAM
Address: 2295 CAROLYN DRIVE
City-St-Zip: DUNEDIN, FL 34698

Title: D () Delete
Name: COLLYER, GORDON
Address: 3350 EAST LAKESHORE LN.
City-St-Zip: CLEARWATER, FL 33761

Title: D () Delete
Name: THORINGTON, JOHN
Address: 10117 BENNINGTON DRIVE
City-St-Zip: TAMPA, FL 33626

Title: D () Delete
Name: DEBOLT, JERRY
Address: 1771 MARSH WREN WAY
City-St-Zip: PALM HARBOR, FL 34683

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: HORNE, GREG
Address: 4922 KYLEMORE CT.
City-St-Zip: PALM HARBOR, FL 34685

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: JOHN E. BLOOM

PD

04/30/2008

Electronic Signature of Signing Officer or Director

_____ Date