

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Aug 27, 2004 8:00 am
Secretary of State

08-27-2004 90005 004 ****61.25

DOCUMENT # 718058

1. Entity Name

PALMA CEIA BAPTIST HOLDING CO.



Principal Place of Business

**3511 BAY TO BAY BLVD
TAMPA FL 33629**

Mailing Address

**3511 BAY TO BAY BLVD
TAMPA FL 33629**

54070497

2. Principal Place of Business

PALMA CEIA BAPTIST

Suite, Apt. #, etc.

3. Mailing Address

3511 Bay to Bay Blvd.

Suite, Apt. #, etc.



MOORE

CR2E037 (4/04)

City & State

Tampa, FL

City & State

4. FEI Number

59-0806979

Applied For

Not Applicable

Zip **33629**

Country

Hillsboro

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**GARNER, HARVEY
3921 ESTRELLA
TAMPA FL 33629**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **VD** ☐ Delete
NAME **HAMRICK, JACK**
STREET ADDRESS **14104 CYPRESS RUN**
CITY-ST-ZIP **TAMPA FL 33624**

TITLE **T** ☒ Delete
NAME **WITTMAYER, FLORA MAE**
STREET ADDRESS **3412 W. LAWN AVENUE**
CITY-ST-ZIP **TAMPA, FL 00000 33611**

TITLE **VD** ☐ Delete
NAME **WHIDDEN, ED**
STREET ADDRESS **3709 W TYSON AVENUE**
CITY-ST-ZIP **TAMPA FL**

TITLE **S** ☒ Delete
NAME **DIXON, LEONA**
STREET ADDRESS **3824 CORONA**
CITY-ST-ZIP **TAMPA FL**

TITLE **PD** ☐ Delete
NAME **GARNER, HARVEY**
STREET ADDRESS **3921 W ESTRELLA**
CITY-ST-ZIP **TAMPA FL**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **T** ☒ Change ☐ Addition
NAME **DEMID, ALEX**
STREET ADDRESS **3916 W. Wyoming Ave.**
CITY-ST-ZIP **Tampa, FL 33616**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **S** ☒ Change ☐ Addition
NAME **LARA, NANCY**
STREET ADDRESS **3518 W. Azeele St. Apt. #122**
CITY-ST-ZIP **Tampa, FL 33609**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Harvey W. Garner 8/25/04 2583633