


# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 21, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 718058</b> 1. Entity Name PALMA CEIA BAPTIST HOLDING CO.	
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Principal Place of Business PALMA CEIA BAPTIST TAMPA, FL 33629	Mailing Address 3511 BAY TO BAY BLVD TAMPA, FL 33629
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**DO NOT WRITE IN THIS SPACE**



04192005 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-0806979	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  GARNER, HARVEY 3921 ESTRELLA TAMPA, FL 33629	<b>DO NOT WRITE IN THIS SPACE</b>
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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 Harvey Garner, Agent *Harvey W. Garner* 4-19-05  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

<b>Filing Fee is \$61.25 Due by May 1, 2005</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HAMRICK, JACK 14104 CYPRESS RUN TAMPA, FL 33624
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DEMID, ALEX 3916 W. WYOMING AVE. TAMPA, FL 33616
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WHIDDEN, ED 3709 W TYSON AVENUE TAMPA, FL 33611
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LARA, NANCY 3518 W. AZEELE ST. APT. #122 TAMPA, FL 33609
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GARNER, HARVEY 3921 W ESTRELLA TAMPA, FL 33629
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000320886  
04/21/05-80057-004 70.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Harvey W. Garner 4-19-05  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #