2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Secretary of State DOCUMENT # 718535 1. Entity Name ___ 02-27-2006 90080 042 ****70.00 FIRST BAPTIST CHURCH OF WEST TAMPA, INC. Principal Place of Business Mailing Address 1302 N WILLOW AVENUE P O BOX 4878 TAMPA FL 33677-4878 **TAMPA FL 33607** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) 4. FEI Number City & State City & State Applied For 05-0045522 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HAUGABROOK, EARL Street Address (P.O. Box Number is Not Acceptable) 1407 SHELL FLOWER DRIVE **BRANDON FL 33511** City Zip Code 6. 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2006. Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Addition X Delete TITLE Change 🔼 Reddick, Frank REDDICK, FRANK NAM NAME 4610 JOHN BELL DRIVE STREET ADDRESS 4610 John Bell Dr. STREET ADDRESS Tampa, F1 33610 **TAMPA FL 33610** CITY-ST-ZIP CITY-ST-ZIP **⊠** Delete Change TSTLE ☐ Addition TITLE Pyles, Elliott 1509 5th Avenue Tampa, Fl¹²33605 DUKES, HINESMAN NAME NAME STREET ADDRESS 4711 S HIMES AVE STREET ADDRESS CITY-ST-7IP TAMPA FL 33611 CITY-ST-ZIP TITLE ☐ Change Addition TITLE Delete HAUGABOOK, EARL Scott Sr., Theodore A. NAME NAME STREET ADDRESS 1407 SHELL FLOWER DRIVE STREET ADDRESS 4511 Westcott Lane CITY-ST-7IP BRANDON FL 33511 CITY-ST-ZIP Tampa, F1 33624 THILE ☐ Delete TITLE K Change ☐ Addition LEGREE, BILLY Dukes, Hinesman 11250 Creek Haven Dr. STREET ADDRESS 6901 SUMMERBRIDGE DRIVE STREET ADDRESS TAMPA FL 33634 CITY-ST-ZIP Riverview, F1 CITY-ST-ZIP 33569 TITLE TITLE ☐ Delete ☐ Change Addition SPENCER, CHARLES C NAME NAME 9403 W. FLORA STREET STREET ADDRESS STREET ADDRESS **TAMPA FL 33615** CITY-ST-ZIP CITY-ST-ZIP D TITLE Delete TITLE Change ☐ Addition PYLES, ELLIOTT NAME NAME 1509 5TH AVE STREET ADDRESS STREET ADDRESS **TAMPA FL 33605** CITY-ST-ZIP CITY-ST-7IP

12. I hereby certify that the information supplied with this filling does not quality for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplier ental poor to the fact 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 of trustee employees 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 all other like empowered.

2-13-06

FAMIL REDDICK

SIGNATURE:

FILED

Feb 27, 2006 8:00 am