

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2006 8:00 am
Secretary of State

04-05-2006 90150 048 ****61.25

DOCUMENT # 718928



1. Entity Name
**TRUSTEES ST. MATTHEW MISSIONARY BAPTIST
CHURCH OF TAMPA, FLORIDA, INC.**

Principal Place of Business
**2628 27TH AVENUE
TAMPA, FL 33605**

Mailing Address
**P. O. BOX 5341
TAMPA, FL 33675-5341 US**

50008977



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01062006 Chg-NP

CR2E037 (11/06)

City & State

City & State

4. FEI Number
59-2249591

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**HARRIS, CLIFFORD JR
3206 E. GIDDENS
TAMPA, FL 33610**

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

(NOTE: Registered Agent signature required when resigning.)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

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 NAME STREET ADDRESS CITY-STATE-ZIP	PD HARRIS, TOMMY 1932 ERIN BROOKE DR VALRICO, FL 33694	☐ Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	VPO HILL, ALVIN 9825 WYDELLA ST RIVERVIEW, FL 33669	☒ Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	SD GATLING, JOHN 3205 N 46 ST TAMPA, FL 33606	☒ Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	TD TAYLOR, GREGORY 4806 SHOSHONE CT APT 72 TAMPA, FL 33610	☒ Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	VPO Taylor, William 3019 1/2 E Osborne Ave Tampa, FL 33610	☐ Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	TD Shipp, John 3903 E Hanna Ave Tampa, FL 33610	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-STATE-ZIP	SO Stephens, Timothy 8700 N. 50th Street Apt 1034 Tampa FL 33617	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	Lasseter, James 1501 Bluebell Dr. Brandon, FL 33511	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	Nelson, William 1718 Deauville Dr. Tampa FL 33610	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	Williams, Tony 3005 E. Curtis Tampa, FL 33610	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	Shipp, Christopher 502 Sandy Creek Dr. Brandon, FL 33511	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	Walker, David 3006 33rd Ave. Tampa FL 33610	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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

Days in Phone 3

PD

April 201

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