

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720066

FILED
Sep 03, 2008
Secretary of State

Entity Name: PALM AVENUE BAPTIST TOWER, INC.

Current Principal Place of Business:

215 E PALM AVE
TAMPA, FL 336022200 US

New Principal Place of Business:

Current Mailing Address:

215 E PALM AVE
TAMPA, FL 336022200 US

New Mailing Address:

FEI Number: 59-1466401 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

WEAR, JOE T., JR.
1301 - 10TH ST E #B
PALMETTO, FL 34221 US

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: P () Delete
Name: STRAIN, RANDY,
Address: 4016 EL PRADO
City-St-Zip: TAMPA, FL

Title: ST () Delete
Name: STRAIN, SALLY
Address: 4016 EL PRADO
City-St-Zip: TAMPA, FL

Title: D () Delete
Name: CRAMER, ROBBY
Address: 5200 DOVE DR.
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: D () Delete
Name: JULUE, DAVID
Address: 502 E. CLARA DR.
City-St-Zip: BRANDON, FL 33510

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: JR WEAR,

AGT

09/03/2008

Electronic Signature of Signing Officer or Director

Date