

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730032

FILED
Apr 08, 2009
Secretary of State

Entity Name: TAMPA BAY BAPTIST FOUNDATION, INC.

Current Principal Place of Business:

1060 W. BUSCH BLVD
SUITE 101
TAMPA, FL 336127707 US

New Principal Place of Business:

Current Mailing Address:

1060 W. BUSCH BLVD
SUITE 101
TAMPA, FL 336127707 US

New Mailing Address:

FEI Number: 23-7397487

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSH ROSS REGISTERED AGENT SERVICES, LLC
1801 NORTH HIGHLAND AVENUE
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

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: VD () Delete
Name: DANIELS, PAUL
Address: 3004 RIVER GROVE DR
City-St-Zip: TAMPA, FL

Title: SD () Delete
Name: PURCELL, CHIP
Address: 18014 SPARROWS NEST DRIVE
City-St-Zip: LUTZ, FL 33558

Title: PD () Delete
Name: WARREN, JEFFREY W
Address: 124 HICKORY CREEK BLVD
City-St-Zip: BRANDON, FL 33511

Title: T () Delete
Name: OSBORNE, RUSSELL
Address: 1310 W. BRANCH BLVD
City-St-Zip: TAMPA, FL 33612

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: JEFFREY W. WARREN

PD

04/08/2009

Electronic Signature of Signing Officer or Director

Date