Addition

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## FILE NOW: FILING FEE IS \$61,25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State
DIVISION OF CORPORATIONS

DOCU	MENT#	732719	١

1. Corporation Name

FAITH OF CHRIST BIBLE REVIVAL CHURCH, INC.

Principal Place of Busine	988
4812 ASHLAND DR	

Mailing Address

4812 ASHLAND DR TAMPA FL 33610



**FILED** 

Jul 14, 1999 8:00 am Secretary of State

07-14-1999 90017 038 \*\*\*\*61.50

07-14-1999 90017 037 \*\*\*\*\*8.75

Suite, Apt. #, etc.  Applied For Not Applicable  City & State  City & State  City & State  Zip  Country  Zip  Country  Zip  Country  Zip  Country  Signature, type of or printed name of registered agent and title if registered agent and title if registered Agent agent. I mill aminor with an accept the obligations of, Sections 17,0503, Floridas Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or Port. In the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or Port. In the State of Florida, Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered of the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered of the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered of the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Flori	28 Suite, Apt. #, etc.   Sp-1648361   Not Applica For Sp-1648361   Not Applica Status City & State   City & State   City & State   Sp-1648361   Status Desired   Sp-1648361   Not Applica Status Desired   Sp-1648361   Status Desired   Sp-1648361   Not Applica Status Desired   Sp-1648361							1 A 11 A 11 A	-			
Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   Sp-1648361   Not Applicable City & State   City & State   Sp-1648361   Sp-1648361   Not Applicable City & State   Sp-1648361   Sp-1	Suite, Apt. #, etc.	<ol><li>Principal P</li></ol>	Place of Business 2a. Mailing Address									
Suite, Apt. #, etc.    Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   Sp-1648361   Not Applicable	Suite, Apt. #, etc.    Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   Spided For Sp-1648361   Not Applied For Spided For Spi	21		26				05/09/1975				
City & States    City & States	City & State  City & State  Zip  Country  Size Country  Zip  Country  Zip  Country  Size Country  Zip  Country  Zip  Country  Zip  Country  Size Country  Zip  Country  Zip  Country  Size Country  Zip  Country  Zip  Country  Zip  Country  Size Country  Zip  Country  Size Country  Size Address of Status Desired  Zize Country  Size Address of New Registered Agent  Added to Fees  Size Country  Size Address (P.O. Box Number is Not Acceptable)  Size City  Size Country  Size Country  Size Address (P.O. Box Number is Not Acceptable)  Size City  Size Country  Size Address (P.O. Box Number is Not Acceptable)  Size City  Size City  Size Country  Size City		#, etc.	Suite, Apt. #,	etc.					App	lied For	
City & State 28	City & State 28	22		27				59-1648361		Not	Applicable	
Zip   Country   Zip   Zi	Zip   Country   Zip   Country   St. Election Campaign Financing   \$5.00 May Be Added to Fees		te	City & State				5 Certificate of Status Desired	NZ/	*****		
Zip Country Zip Country 2ip Country 6. Election Campaign Financing Trust Fund Contribution Added to Fees  9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent  CANADA, MOSES 4812 ASHLAND DR TAMPA FL 33610  82 Street Address (P.O. Box Number is Not Acceptable)  83	Zip Country Zip Country 2ip Country 6. Election Campaign Financing Added to Fees  9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent  CANADA, MOSES 4812 ASHLAND DR TAMPA FL 33610  84 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, a mainliar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SiGNATURE  Signature, byed or privide name of registered agent and the # applicable. (NOTE: Registered Agent expraiser sequired when reinstating)  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 NAME  CANADA, FLOYD J  STREET ADDRESS  4812 ASHLAND DRIVE  12 NAME  CANADA, SANDRA R  CANADA, SANDRA R  CANADA, SANDRA R  STREET ADDRESS  4812 ASHLAND DRIVE  TITLE  TO  CANADA, SANDRA R  22 NAME  STREET ADDRESS  4812 ASHLAND DRIVE  13. STREET ADDRESS  4812 ASHLAND DRIVE  14. CTY'-ST-ZIP  TIME  PD  DELETE  21 TITLE  CANADA, MOSES  STREET ADDRESS  4812 ASHLAND DRIVE  33. STREET ADDRESS  4812 ASHLAND DRIVE	23		28				Grandate of Glatos Besides	ايون	Fee Red	quired	
9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  11. Name and Address of New Registered Agent  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  14. TITLE  15. CANADA, FLOYD J  16. TITLE  17. MAKE  18. CANADA, FLOYD J  18. CANADA, SANDRA R  18. STREET ADDRESS  19. STREET ADDRESS  29. STREET A	9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  Signature, typed or printed name of registered agent and tible if applicable.  (NOTE: Registered Agent signature required when reinstalling)  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TIME  TO DELETE  11. TIME  T DELETE  12. OFFICERS AND DRIVE  13. STREET ADDRESS  4812 ASHLAND DRIVE  14. CITITLE  T AMME  CANADA, FLOYD J  13. STREET ADDRESS  14. City  14. CITITLE  T OBLETE  21. TIME  T AMME  CANADA, SANDRA R  22. NAME  STREET ADDRESS  4812 ASHLAND DRIVE  13. STREET ADDRESS  CITY-ST-ZP  TAMPA FL  14. CITITLE  T AMME  CANADA, SANDRA R  22. NAME  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  4812 ASHLAND DRIVE  13. STREET ADDRESS  CITY-ST-ZP  TAMPA FL  24. CITY-ST-ZP  TIME  T AMME  CANADA, MOSES  32. STREET ADDRESS  32. STREET ADDRESS  33. STREET ADDRESS  34. City  TAMPA FL  CANADA, MOSES  33. STREET ADDRESS  4812 ASHLAND DRIVE  33. STREET ADDRESS  34. City  57. STREET ADDRESS  4812 ASHLAND DRIVE  33. STREET ADDRESS  34. City  57. STREET ADDRESS  34. City  57. STREET ADDRESS  4812 ASHLAND DRIVE  33. STREET ADDRESS  34. City  57. STREET ADDRESS  34. City  57. STREET ADDRESS  4812 ASHLAND DRIVE  33. STREET ADDRESS  34. City  57. STREET ADDRESS  34. City  57. STREET ADDRESS  4812 ASHLAND DRIVE  33. STREET ADDRESS  34. City  57. STREET ADDRESS  35. STREET ADDRESS  35. STREET ADDRESS  36. ST		Country	Zip	Co	untry	-,	6. Election Campaign Financing	_	\$5.00 (	May Be	
CANADA, MOSES  4812 ASHLAND DR TAMPA FL 33610  11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE    Signature, hyped or printed name of registered agent and tible if applicable.   (NOTE: Registered Agent spinature required when reinstating)   DATE	CANADA, MOSES  4812 ASHLAND DR TAMPA FL 33610  11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and amiliar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  Signature, typed or printed name of registered agent and tibe if applicable.  OFFICERS AND DIRECTORS  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  T	24	25 29 30		30				Trust Fund Contribution		Added to Fees	
CANADA, MOSES 4812 ASHLAND DR TAMPA FL 33610  84 City  FL 85 Zip Code  11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  Signature, typed or printed name of registered agent and title if epiticable.  OFFICERS AND DIRECTORS  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  TAMAE  CANADA, FLOYD J  STREET ADDRESS  CITY. ST-ZIP  TAMPA FL  1.4 CITY. ST-ZIP  TITLE  TAMPA FL  1.4 CITY. ST-ZIP  TAMPA FL  1.5 STREET ADDRESS  CANADA, SANDRA R  2.2 NAME  STREET ADDRESS  CITY. ST-ZIP  TAMPA FL  1.4 CITY. ST-ZIP  TITLE  TAMPA FL  1.5 CHange Addition  CANADA, MOSES	CANADA, MOSES 4812 ASHLAND DR TAMPA FL 33610  82 Street Address (P.O. Box Number is Not Acceptable)  83   Street Address (P.O. Box Number is Not Acceptable)  84 City   FL   85   Zip Code  85   Zip Code  11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and the If applicable.  SIGNATURE   Signature, typed or printed name of registered agent and the If applicable. (NOTE: Registered Agent signature required when reinstalling)   DATE    12. OFFICERS AND DIRECTORS   13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE   CANADA, FLOYD J   12 TITLE   Change   Add CHANDA   ASHLAND DRIVE   13 STREET ADDRESS    STREET ADDRESS   4812 ASHLAND DRIVE   22 NAME   22 NAME    STREET ADDRESS   4812 ASHLAND DRIVE   23 STREET ADDRESS   4812 ASHLAND DRIVE   23 STREET ADDRESS    TAMPA FL   CANADA, MOSES   32 NAME   33 NAME   CANADA, MOSES   33 NAME   STREET ADDRESS   4812 ASHLAND DRIVE   33 STREET ADDRESS   33 STREET ADDRESS   4812 ASHLAND DRIVE   33 STREET ADDRESS   33 STREET ADDRESS   4812 ASHLAND DRIVE   33 STREET ADDRESS   33 NAME   33 STREET ADDRESS   4812 ASHLAND DRIVE   33 STREET ADDRESS   33 STREET ADDRESS   4812 ASHLAND DRIVE   33 STREET ADDRESS   33 STREET ADDRESS   4812 ASHLAND DRIVE   33 STREET ADDRESS   33 STREET ADDRESS   4812 ASHLAND DRIVE   33 STREET ADDRESS   33 STREET ADDRESS   4812 ASHLAND DRIVE   33 STREET ADDRESS   3					L		10. Name and Address of New	Registered A	\gent		
4812 ASHLAND DR TAMPA FL 33610  83  64 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, in am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent agreature required when reintstating)  DATE  12. OFFICERS AND DIRECTORS 11. TITLE T DELETE 11. TITLE 12. AMME  STREET ADDRESS CITY. ST. ZIP TAMPA FL 13. STREET ADDRESS CITY. ST. ZIP TAMPA FL 14. CITY. ST. ZIP TAMPA FL 14. CITY. ST. ZIP TAMPA FL 22. NAME  15. CANADA, SANDRA R 22. NAME  16. CANADA, SANDRA R 22. NAME  17. ST. ZIP TAMPA FL 22. NAME  17. Change Addition Change Change Addition Change Change Addition Change Change Addition Change Chan	4812 ASHLAND DR TAMPA FL 33610  84 City  FL  85 Zip Code  11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registerer office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, in an familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstaing)  DATE  12.  OFFICERS AND DIRECTORS  13.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  TAMME  CANADA, FLOYD J  STREET ADDRESS  CITY-ST-ZIP  TAMPA FL  14 CITY-ST-ZIP  TAMPA FL  14 CITY-ST-ZIP  TAMPA FL  14 CITY-ST-ZIP  TAMPA FL  15 CANADA, SANDRA R  STREET ADDRESS  STREET ADDRESS  TAMPA FL  2 A CITY-ST-ZIP  AMME  CANADA, MOSES  STREET ADDRESS					81	Name					
4812 ASHLAND DR TAMPA FL 33610  83  64 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, in am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent agreature required when reintstating)  DATE  12. OFFICERS AND DIRECTORS 11. TITLE T DELETE 11. TITLE 12. AMME  STREET ADDRESS CITY. ST. ZIP TAMPA FL 13. STREET ADDRESS CITY. ST. ZIP TAMPA FL 14. CITY. ST. ZIP TAMPA FL 14. CITY. ST. ZIP TAMPA FL 22. NAME  15. CANADA, SANDRA R 22. NAME  16. CANADA, SANDRA R 22. NAME  17. ST. ZIP TAMPA FL 22. NAME  17. Change Addition Change Change Addition Change Change Addition Change Change Addition Change Chan	4812 ASHLAND DR TAMPA FL 33610  84 City  FL  85 Zip Code  11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registerer office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reintating)  DATE  12.  OFFICERS AND DIRECTORS  13.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  T DELETE  11 TITLE  T CANADA, FLOYD J  STREET ADDRESS  4812 ASHLAND DRIVE  13 STREET ADDRESS  CITY-ST-ZIP  TAMPA FL  14 CITY-ST-ZIP  TAMPA FL  14 CITY-ST-ZIP  TAMPA FL  16 Change  Add  CANADA, MOSES  TAMPA FL  22 NAME  STREET ADDRESS  TAMPA FL  24 ACITY-ST-ZIP  NAME  CANADA, MOSES  STREET ADDRESS	CANADA	MOSES			82	Street Addr	ress (P.O. Box Number is Not Accept	able)			
TAMPA FL 33610  84 City  FL 85 Zip Code  11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, a minimizer with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable.  (NOTE: Registered Agent adjuster required when reinstating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  T  NAME  CANADA, FLOYD J  12. NAME  13. STREET ADDRESS  4812 ASHLAND DRIVE  13. STREET ADDRESS  CITY-ST-ZIP  TAMPA FL  T  DELETE  11 TITLE  T  DELETE  21 TITLE  CANADA, SANDRA R  STREET ADDRESS  4812 ASHLAND DRIVE  12. STREET ADDRESS  TAMPA FL  12. ACITY-ST-ZIP  TAMPA FL  14. CITY-ST-ZIP  TAMPA FL  CANADA, SANDRA R  12. STREET ADDRESS  CITY-ST-ZIP  TAMPA FL  14. CITY-ST-ZIP  CANADA, SANDRA R  15. STREET ADDRESS  16. Change  Addition  Addi	TAMPA FL 33610  84 City  FL  85 Zip Code  11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registerer office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  Signature. Typed or printed name of registered agent and title if applicable.  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  T  AMME  CANADA, FLOYD J  STREET ADDRESS  CITY-ST-ZIP  TAMPA FL  14. CITY-ST-ZIP  TAMPA FL  14. CITY-ST-ZIP  TAMPA FL  14. CITY-ST-ZIP  TAMPA FL  22. NAME  STREET ADDRESS  4812 ASHLAND DRIVE  13. STREET ADDRESS  CITY-ST-ZIP  TAMPA FL  22. NAME  23. STREET ADDRESS  CITY-ST-ZIP  TAMPA FL  24. CITY-ST-ZIP  CANADA, MOSES  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  4812 ASHLAND DRIVE  32. NAME  CANADA, MOSES  STREET ADDRESS  4812 ASHLAND DRIVE  33. STREET ADDRESS  4812 ASHLAND DRIVE  33. STREET ADDRESS						•					
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE    Signature, typed or printed name of registered agent and tible if applicable. (NOTE: Registered Agent signature required when reinstating)   DATE	11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and other registered agent and other registered agent and other registered Agent as ginature required when reinstating)    12.					83						
11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes.  SIGNATURE  SIGNATURE  TO OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  TO DELETE  11. TITLE  CANADA, FLOYD J  STREET ADDRESS  4812 ASHLAND DRIVE  TAMPA FL  TITLE  TO DELETE  14. CITY-ST-ZIP  TITLE  TAMPA FL  DELETE  22. NAME  STREET ADDRESS  STREET ADDRESS  CITY-ST-ZIP  TAMPA FL  DELETE  23. STREET ADDRESS  CITY-ST-ZIP  TAMPA FL  CANADA, MOSES  DELETE  3.1 TITLE  Change  Addition  Change  Change  Addition  Change  Addition  Change  Addition  Change  Change  Addition  Change  Ch	11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  T DELETE  11. TITLE  CANADA, FLOYD J  4812 ASHLAND DRIVE  TAMPA FL  14. CITY-ST-ZIP  TAMPA FL  14. CITY-ST-ZIP  TAMPA FL  15. DELETE  16. CANADA, SANDRA R  STREET ADDRESS  CITY-ST-ZIP  TAMPA FL  17. DELETE  21. STITLE  CANADA, SANDRA R  STREET ADDRESS  CITY-ST-ZIP  TAMPA FL  17. DELETE  21. STITLE  CANADA, MOSES  STREET ADDRESS  CITY-ST-ZIP  TITLE  PD  CANADA, MOSES  STREET ADDRESS  4812 ASHLAND DRIVE  32. NAME  CANADA, MOSES  STREET ADDRESS  4812 ASHLAND DRIVE  33. STREET ADDRESS  CITY-ST-ZIP  TITLE  PD  Change  Add  CANADA, MOSES  STREET ADDRESS  4812 ASHLAND DRIVE  33. STREET ADDRESS  4812 ASHLAND DRIVE  33. STREET ADDRESS  34812 ASHLAND DRIVE  33. STREET ADDRESS  4812 ASHLAND DRIVE	IMPLATE	L 35010			-	Cit.			es Zin C	ode	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, a manufacture with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  OFFICERS AND DIRECTORS IN 12  TITLE  T  CANADA, FLOYD J  STREET ADDRESS  CITY-ST-ZIP  TITLE  T  CANADA, SANDRA R  STREET ADDRESS  CITY-ST-ZIP  TAMPA FL  T  CANADA, SANDRA R  STREET ADDRESS  CITY-ST-ZIP  TAMPA FL  TAMPA FL  CANADA, SANDRA R  STREET ADDRESS  CITY-ST-ZIP  TAMPA FL  TAMPA FL  CANADA, SANDRA R  STREET ADDRESS  CITY-ST-ZIP  TAMPA FL  TAMPA FL  CANADA, SANDRA R  STREET ADDRESS  CITY-ST-ZIP  TITLE  PD  DELETE  31 TITLE  CANADA, MOSES  32 NAME  Addition  Change  Chan	11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  T  NAME  CANADA, FLOYD J  12. NAME  CANADA, FLOYD J  13. STREET ADDRESS  CITY-ST-ZIP  TAMPA FL  14. CITY-ST-ZIP  TAMPA FL  CANADA, SANDRA R  STREET ADDRESS  CITY-ST-ZIP  TAMPA FL  12. NAME  CANADA, SANDRA R  STREET ADDRESS  CITY-ST-ZIP  TAMPA FL  12. NAME  CANADA, SANDRA R  13. STREET ADDRESS  CITY-ST-ZIP  TAMPA FL  14. CITY-ST-ZIP  TAMPA FL  22. NAME  23. STREET ADDRESS  CITY-ST-ZIP  TAMPA FL  10. Change Add  Add  CANADA, MOSES  STREET ADDRESS  CITY-ST-ZIP  TAMPA FL  13. STREET ADDRESS  CITY-ST-ZIP  TAMPA FL  24. CITY-ST-ZIP  TITLE  PD  CANADA, MOSES  STREET ADDRESS  4812 ASHLAND DRIVE  33. STREET ADDRESS  STREET ADDRESS  4812 ASHLAND DRIVE  33. STREET ADDRESS  STREET ADDRESS  4812 ASHLAND DRIVE  33. STREET ADDRESS  4812 ASHLAND DRIVE  33. STREET ADDRESS  STREET ADDRESS  4812 ASHLAND DRIVE  33. STREET ADDRESS  4812 ASHLAND DRIVE					04	City		FL	163 Zip C	.000	
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		CITY-ST-ZIP TITLE NAME	4812 ASHLAND DRIVE TAMPA FL PD CANADA, MOSES	□ DE	2.3.5 2.4 ELETE 3.1.7 3.2.8	CITY-S TITLE VAME	T-ZIP	<del></del>		☐ Change	☐ Addition	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if chapter 617 is chapter 617.

4.1 TITLE

4, 2 NAME

51 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

4.3 STREET ADORESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

SIGNATURE

TITLE

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CANADA, GENNIE MAE

419 E HUGH ST

CANADA, JACOB A

4812 ASHLAND DR

TIMOTHY L. CANADA

4812 ASHLAND DR.

TAMPA FL.

TAMPA FL

VP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

DELETE

□ DELETE

July/1/49

Daytime Phone #