2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Jul 23, 2008 **DOCUMENT# 734457** Secretary of State

Entity Name: SEMINOLE HEIGHTS BAPTIST CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business:

SEMINOLE HEIGHTS BAPTIST CHURCH INC 801 E. HILLSBOROUGH AVENUE TAMPA, FL 33604

Current Mailing Address: New Mailing Address:

SEMINOLE HEIGHTS BAPTIST CHURCH INC 801 E. HILLSBOROUGH AVENUE TAMPA, FL 33604

FEI Number: 59-0766995 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WOOLDRIDGE, GARY WOOLDRIDGE, GARY PASTOR 9608 SPRINGBROOK DR 9608 SPRINGBROOK DR RIVERVIEW, FL 335693810 US RIVERVIEW, FL 335693810 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: GARY WOOLDRIDGE 07/23/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete () Change () Addition

BYRD, TOM Name: Name:

3820 GULF BOULEVARD #205 Address: Address: City-St-Zip: ST. PETE BEACH, FL 33706 City-St-Zip:

Title: Title: () Delete () Change () Addition SILER-NIXON, DAWN Name: Name:

Address: 16529 FOOTHILL DRIVE Address: City-St-Zip: TAMPA, FL 33624 City-St-Zip:

Title: () Delete Title: () Change () Addition

HUME, CATHY Name: Name: 208 W. LAMBRIGHT Address: Address: City-St-Zip: TAMPA, FL 33604 City-St-Zip:

Title: () Delete Title: () Change () Addition

Name: VALLE, JOE D Name: 14610 BRENTWOOD LANE Address: Address: City-St-Zip: TAMPA, FL 33618 City-St-Zip:

Name:

Title: () Delete Title: (X) Change () Addition

GUILLORY, IRMA DEATON, BILL Name: Name:

1109 E. ESKIMO AVE. 1711 BEDINGFIELD DR. Address: Address: City-St-Zip: TAMPA, FL 33604 City-St-Zip: **TAMPA, FL 33603**

Title: () Delete Title: () Change (X) Addition

LIBBY JR., ANDY Name: Address: Address: 806 S. MACDILL AVE. TAMPA, FL 33609 City-St-Zip: 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: GARY WOOLDRIDGE RΑ 07/23/2008