2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2009
Secretary of State

DOCUMENT# 734457

Entity Name: SEMINOLE HEIGHTS BAPTIST CHURCH, INC.

Current Principal Place of Business:

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

New Principal Place of Business:

Current Mailing Address:

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

New Mailing Address:

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

Name and Address of Current Registered Agent:

WOOLDRIDGE, GARY PASTOR
9608 SPRINGBROOK DR
RIVERVIEW, FL 335693810 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: D ( ) Delete
Name: BYRD, TOM
Address: 3820 GULF BOULEVARD #205
City-St-Zip: ST. PETE BEACH, FL 33706

Title: D ( ) Delete
Name: SILER-NIXON, DAWN
Address: 16529 FOOTHILL DRIVE
City-St-Zip: TAMPA, FL 33624

Title: D ( ) Delete
Name: HUME, CATHY
Address: 208 W. LAMBRIGHT
City-St-Zip: TAMPA, FL 33604

Title: D (X) Delete
Name: VALLE, JOE D
Address: 14610 BRENTWOOD LANE
City-St-Zip: TAMPA, FL 33618

Title: D ( ) Delete
Name: DEATON, BILL
Address: 1711 BEDINGFIELD DR.
City-St-Zip: TAMPA, FL 33603

Title: D ( ) Delete
Name: LIBBY JR., ANDY
Address: 806 S. MACDILL AVE.
City-St-Zip: TAMPA, FL 33609

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: KING, LEILA
Address: 5108 CULPEPPER PLACE
City-St-Zip: WESLEY CHAPEL, FL 33544

Title: D (X) Change ( ) Addition
Name: GUILLORY, IRMA
Address: 1109 E. ESKIMO AVE
City-St-Zip: TAMPA, FL 33604

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: GARY WOOLDRIDGE D 01/12/2009

Electronic Signature of Signing Officer or Director — Date