

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 07, 2004 8:00 am**  
**Secretary of State**

04-07-2004 90005 034 \*\*\*\*61.25

**DOCUMENT # 735256**

1. Entity Name

FIRST CHRISTIAN CHURCH (DISCIPLES OF CHRIST)  
OF TAMPA, FLORIDA, INC.



Principal Place of Business

350 HYDE PARK  
TAMPA FL 33606

Mailing Address

350 HYDE PARK  
TAMPA FL 33606

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



MOORE

CR2E037 (11/03)

4. FEI Number

59-0737875

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

WASCOVICH, CRAIG  
350 HYDE PARK AVE  
TAMPA FL 33606

7. Name and Address of New Registered Agent

Name Theodore J. Hamilton Esq

Street Address (P.O. Box Number is Not Acceptable)

400 N. Tampa St Suite 2625

City

Tampa

FL

Zip Code  
33549

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3/24/2004

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be**  
**Added to Fees**

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE S ☒ Delete  
NAME WOOD, SYLVIA  
STREET ADDRESS 3306 E. YUKON  
CITY-ST-ZIP TAMPA FL 33604

TITLE DP ☒ Delete  
NAME CHAMBERS, CAROL  
STREET ADDRESS 10306 CASA PALERMO DR. #4  
CITY-ST-ZIP RIVERVIEW FL 33569

TITLE T ☐ Delete  
NAME THOMPSON, JANE  
STREET ADDRESS 208 LAKE PARSONS GREEN, #415  
CITY-ST-ZIP BRANDON FL

TITLE DV ☐ Delete  
NAME BITTICK, KELLY  
STREET ADDRESS 4106 W MULLEN AVE  
CITY-ST-ZIP TAMPA FL 33609

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE BOARD CHAIR ☒ Change ☐ Addition  
NAME BITTICK, KELLY  
STREET ADDRESS 4106 W. MULLEN AVE  
CITY-ST-ZIP TAMPA, FL 33609

TITLE BOARD VICE CHAIR ☐ Change ☒ Addition  
NAME TAKEWAY, WAYNE  
STREET ADDRESS 15306 LAKE MAURINE DR.  
CITY-ST-ZIP ODESSA, FL 33556-3112

TITLE TREASURER ☐ Change ☐ Addition  
NAME THOMPSON, JANE  
STREET ADDRESS 208 LAKE PARSONS GREEN, #415  
CITY-ST-ZIP BRANDON, FL 33511

TITLE SECRETARY ☐ Change ☒ Addition  
NAME ANDERSON, SUE  
STREET ADDRESS 18020 CRAWLEY RD.  
CITY-ST-ZIP ODESSA, FL 33556

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jane Thompson JANE THOMPSON  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

APR 1, 2004 (913) 253-0811  
Date Daytime Phone #