

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 09, 2005 8:00 am
Secretary of State

02-09-2005 90042 035 ****61.25

DOCUMENT # 736709

1. Entity Name

IGLESIA BAUTISTA MISSIONERA OF TAMPA, INC.



Principal Place of Business

3809 WEST BROAD ST
TAMPA FL 33617

Mailing Address

Rev. Julio C. Castrillo
5160 Tennis Ct. Cir.
Tampa, FL 33617 - 4718

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2906178

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CASTRILLO, JULIO C., REV
5160 TENNIS CT. CIR
TAMPA FL 33617-4718

Name

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

City

FL

Zip Code

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

FILE NOW: FEE IS \$61.25
Due By May 1, 2005

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	PD	<input type="checkbox"/> Delete
NAME	CASTRILLO, JULIO C., REV	
STREET ADDRESS	1903 DAKE LANE	
CITY-ST-ZIP	TAMPA FL	
TITLE	VD	<input type="checkbox"/> Delete
NAME	TERRERO, WILSON	
STREET ADDRESS	8310 N 10TH ST	
CITY-ST-ZIP	TAMPA FL	
TITLE	SD	<input type="checkbox"/> Delete
NAME	PERDOMO, EDNA NYDIA	
STREET ADDRESS	8513 BRIAR GROVE CIR	
CITY-ST-ZIP	TAMPA FL	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	DIAZ, PEDRO F	
STREET ADDRESS	115 CLEMONS RD.	
CITY-ST-ZIP	BRANDON FL 33510-3101	
TITLE	VTD Dinora Lopez	<input type="checkbox"/> Delete
NAME	6926 Green Hill Pl.	
STREET ADDRESS	Temple Terrace, FL 33617	
CITY-ST-ZIP		
TITLE	D Ruben Perdomo	<input type="checkbox"/> Delete
NAME	5328 Starhill Pl	
STREET ADDRESS	Tampa, FL 33624	
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Juan Carlos Argee TD	
STREET ADDRESS	2228 Fletcher's Point Cir.	
CITY-ST-ZIP	Tampa, FL 33613	
TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> 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:

Julio C. Castrillo

2 -03 - 05

(813) 868-0930

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #