

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

FILED
Feb 26, 2004 8:00 am
Secretary of State

02-10-2004 90001 036 ****61.25

66403407



MOORE CR2E037 (11/03)

DOCUMENT # 744391					
1. Entity Name FIRST BAPTIST CHURCH OF RIVERVIEW, FLORIDA, INC.					
Principal Place of Business 8626 HIGHWAY 301 SOUTH RIVERVIEW FL 33569			Mailing Address 8626 HIGHWAY 301 SOUTH RIVERVIEW FL 33569		
2. Principal Place of Business 8626 Highway 301 South		3. Mailing Address 8626 Highway 301 South			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State Riverview, FL		City & State Riverview, FL 33569		4. FEI Number 59-1554609	
Zip 33569		Country USA		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent TONELLI, MICHAEL A. 201 E. KENNEDY BLVD SUITE 901 TAMPA FL 33672-0118			7. Name and Address of New Registered Agent 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD REWIS, ROBBIE 10504 CONE GROVE RD RIVERVIEW FL 33569	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD LITTLE, WILLIAM P 11120 DESOTO RD RIVERVIEW, FL 00000	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GAY, WILLIAM G 9611 PINE RIDGE AVE RIVERVIEW, FL 00000	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MILLS, SHAWN 7810 ALAFIA DR RIVERVIEW FL 33569	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BUTLER, ROGER 7418 KRYCUL AVE, PO BOX 15-33568 RIVERVIEW FL 33569	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
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: <i>Wm P Little</i> William P Little			Date: 2-24-04 813 677 6377		