

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747935

FILED
Apr 30, 2008
Secretary of State

Entity Name: TRUSTEES IDLEWILD BAPTIST CHURCH CO., INC.

Current Principal Place of Business:

18371 N. DALE MABRY HIGHWAY
TAMPA, FL 33548 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 44
LUTZ, FL 33548 US

New Mailing Address:

FEI Number: 59-0774190

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLEM, LARRY A.
10219 DEERCLIFF DRIVE
TAMPA, FL 33647 US

Name and Address of New Registered Agent:

EVANS, JASON
1113 LAKE CHARLES
LUTZ, FL 33548 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: JASON EVANS

04/30/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: CLEM, LARRY A
Address: 10219 DEERCLIFF DRIVE
City-St-Zip: TAMPA, FL 33647

Title: PD () Delete
Name: WAJDOWICZ, JOHN
Address: 906 LAKE BROOKER CT
City-St-Zip: LUTZ, FL 333548

Title: VD () Delete
Name: SMITH, KEN
Address: 1309 OXBRIDGE DRIVE
City-St-Zip: LUTZ, FL 33549

Title: TD () Delete
Name: REZNICEK, AL
Address: 18810 WIMBLEDON CIRCLE
City-St-Zip: LUTZ, FL 33558

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: DAINES, WILLIAM F II
Address: 2815 ORMANDY CT.
City-St-Zip: TAMPA, FL 33618

Title: PD (X) Change () Addition
Name: DEAROLF, PIETER
Address: 5018 CHATTAM LN.
City-St-Zip: TAMPA, FL 33624

Title: VD (X) Change () Addition
Name: BROWN, WILLIAM E
Address: 11615 CARROLLWOOD DR.
City-St-Zip: TAMPA, FL 33618

Title: TD (X) Change () Addition
Name: REZNICEK, ALBERT J
Address: 18810 WIMBLEDON CIRCLE
City-St-Zip: LUTZ, FL 33558

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: ALBERT J. REZNICEK

TD

04/30/2008

Electronic Signature of Signing Officer or Director

Date