

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 12, 2008 08:00 AM
Secretary of State

DOCUMENT # 751665

1. Entity Name

EASTSIDE BAPTIST CHURCH OF AUBURNDALE, INC.



Principal Place of Business

217 PIKE STREET
AUBURNDALE FL 33823
US

Mailing Address

217 PIKE STREET
AUBURNDALE FL 33823
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc

Suite, Apt. #, etc

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

59-1219775

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

SMITH, KIM
112 TEMPSFORD RD
AUBURNDALE FL 33823

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

Kim Smith

U000000950854
06/04/08-80008-013 61.25

(Signature, typed or printed name of registered agent and title if not applicable)

(NOTE: Registered Agent signature not required when re-registering)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

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

TDD
MATHEWS, RALPH
405 JAMES AVE
AUBURNDALE FL 33823 ☐ Delete

ATD
KIRKLAND, GLENDA
217 NOXON STREET
AUBURNDALE FL 33823 ☐ Delete

T
SMITH, KIM
112 TEMPEFORD RD
AUBURNDALE FL 33823 ☐ Delete

☐ Delete

☐ Delete

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

Kim Smith

4-28-08 863-967-1089