2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jan 16, 2007 8:00 am Secretary of State 01-16-2007 90213 030 ****61.25

ANNOAL KEPOKI	
DOCUMENT # 753356	

1. Entity Nam COUNTR INC.	RYSIDE BAPTIST CHURCH											
Principal Place of Business 2525 N. MCMULLEN BOOTH RD. CLEARWATER, FL 33761-4162 Mailing Address 2525 N. MCMULLEN CLEARWATER, FL 33761-4162 CLEARWATER, FL 33)	R 11186 A1181 83118 8111	 	II BIDII 1401 BIT	1) (17 4) (18)		
2. Principal F	Place of Business - No P.O. Box #	3. Mailing Address										
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				01052007 _C	hg-NP	CR2E03	7 (12/06)			
City & Stat	е	City & State	City & State			4. FEI Number Applied Fo 59-2010377 Not Applied						
Zip	Country	Zip	Cou	ıntry		5. Certificate of S	itatus Desired		\$8.75 Add	litional		
	6. Name and Address of Current	Registered Agent				7. Name and Add	dress of New R	egistered A	gent			
DDOMN 3	TIMEOTI IV			Name								
	CMULLEN BOOTH RD. ATER, FL 33761		Street Addres			s (P.O. Box Number is Not Acceptable)						
				City				FL	Zip Cod	θ		
8 The above	named entity submits this statement to	or the purpose of changing	ite zogietora	nd office or	rogistor	ad agost or both in	the Ctete of Cle		nasitias sideb			
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 of applicable. (N	OTE: Registere	d Agent signatur	re required	when reinstating)		DATE				
Filing Fee is \$61.25 Due by May 1, 2007 9. Election Campaign Fi						\$5.00 May Be Added to Fees			payable to ment of St			
10.	OFFICERS AND DI	RECTORS	11.		A	DDITIONS/CHANG	L SES TO OFFICE	RS AND DIF	ECTORS IN	10		
TITLE	SD	☐ Delete	TITLE		SD				Change	Addition		
NAME	PANDY, KAREN		NAMI	1	Huno	dley, Trac	у			1		
STREET ADDRESS CITY-ST-ZIP	1970 BROOKSTONE WAY			ET ADDRESS -St-Zip	350	Pecan Cou	rt			i		
	CLEARWATER, FL 33760			+		Harbor -	FL 3468	3-5915				
TITLE NAME	GIDDINGS, DIXIE M	☐ Delete	TITLE		TD	11 5 1	. •		Change	☐ Addition (
STREET ADDRESS	3141 SOUTH CANAL DRIVE			ET ADDRESS		11, Robert						
CITY-ST-ZIP	PALM HARBOR, FL 34684		CITY	-ST-ZIP	<u>Cleá</u>	Sun Glow rwater Fl	way 33761					
TITLE	PD	☐ Delete	TITLE	I .	PD				± Change	Addition		
NAME STREET ADDRESS	ANKENY, DAVID 2755 CURLEW RD.		NAMI STRE			, Richard						
CITY-ST-ZIP	PALM HARBOR, FL 34684			-ST-ZIP	1016	Patriot I	21ace			Į		
TITLE	VD	☐ Delete	TITLE		VD	MIII FI	74070		Change	Addition		
NAME	LOCK, RICHARD		NAMI	E		on, Richar	d C.					
STREET ADDRESS CITY-ST-ZIP	1016 PATROIT PL. DUNEDIN, FL 34698			ET ADDRESS -ST-ZIP	203	East Arlin	gton					
TITLE	DOMEDIN, 1 E 04000	☐ Delete	TITLE	1	Olds	mar FL	34677		☐ Change	Addition		
NAME		_ Delete	NAMI	1					CT Ottange	(_) Addition		
STREET ADDRESS CITY-ST-ZIP				ET ADDRESS -ST-ZIP								
TITLE		☐ Detete	TITLE				/ // /		☐ Change	Addition		
NAME			NAMI						☐ Change	L. AUGILIGI		
STREET ADDRESS				ET ADDRESS								
CITY-ST-ZIP		AL: 4111		-ST-ZIP								
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 gither like empowered.												
SIGNAT	SIGNATURE AND TYPED OR	PRINTED NAME OF SIGNING OFFICE	ER OR DIRECT	FOR			Date	<i>(A 1) / o</i>	ytime Phone #	- 		