

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755678

FILED
Jul 22, 2006
Secretary of State

Entity Name: HOPE BIBLE CHURCH OF TAMPA, INC.

Current Principal Place of Business:

5706 N. HESPERIDES ST.
TAMPA, FL 33614

New Principal Place of Business:

Current Mailing Address:

5706 N. HESPERIDES ST.
TAMPA, FL 33614

New Mailing Address:

FEI Number: 59-1022407 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

GALLIGAN, GARY
12401 ORANGE GROVE DR.,
#1205
TAMPA, FL 33618 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: COOPER, HARRY
Address: 4506 W FERN STREET
City-St-Zip: TAMPA, FL 33614

Title: D () Delete
Name: BOWYER, ART
Address: 12401 N 22ND ST APT C412
City-St-Zip: TAMPA, FL 33612

Title: D () Delete
Name: PHELPS, STEVE
Address: 15142 SPRINGVIEW ST.
City-St-Zip: TAMPA, FL 33624

Title: D () Delete
Name: HARDEE, BRUCE
Address: 3417 PICWOOD RD.
City-St-Zip: TAMPA, FL 33618

Title: CD () Delete
Name: GALLIGAN, GARY CHRM
Address: 12401 ORANGE GROVE DR., #1205
City-St-Zip: TAMPA, FL 33618

Title: D (X) Delete
Name: WOLCOTT, DAVE
Address: 6418 N. WOODLYNNE AVE.
City-St-Zip: TAMPA, FL 33614

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: GARY GALLIGAN

CD

07/22/2006

Electronic Signature of Signing Officer or Director

Date