

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759267

FILED  
Apr 16, 2009  
Secretary of State

**Entity Name:** FIRST BAPTIST CHURCH OF CARROLLWOOD, INC.

**Current Principal Place of Business:**

5395 EHRLICH ROAD  
TAMPA, FL 33625

**New Principal Place of Business:**

**Current Mailing Address:**

5395 EHRLICH ROAD  
TAMPA, FL 33625

**New Mailing Address:**

**FEI Number:** 59-2105414

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PHILLIPS, ELVIN  
3310 DEL PRADO CT.  
TAMPA, FL 33614 US

**Name and Address of New Registered Agent:**

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: VT ( ) Delete  
Name: GARSIDE, DEL  
Address: 3312 WESTMORELAND  
City-St-Zip: TAMPA, FL 33618

Title: VT ( ) Delete  
Name: HALL, WENDELL  
Address: 5519 RAWLS RD  
City-St-Zip: TAMPA, FL 33625

Title: PD ( ) Delete  
Name: PHILLIPS, ELVIN  
Address: 3310 DEL PRADO CT  
City-St-Zip: TAMPA, FL 33614

Title: VT ( ) Delete  
Name: EVANS, TED  
Address: 9401 ROBERTS RD.  
City-St-Zip: ODESSA, FL 33556

Title: VT ( ) Delete  
Name: BLOCK, ROGER  
Address: 4937 UMBER WAY SOUTH  
City-St-Zip: TAMPA, FL 33624

Title: VT ( ) Delete  
Name: BARNES, JOHN  
Address: 6816 RIVER BLVD  
City-St-Zip: TAMPA, FL 33604

**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 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: ELVIN PHILLIPS

PD

04/16/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date