

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763126

FILED
Apr 13, 2009
Secretary of State

Entity Name: NORTH BAY COMMUNITY CHURCH, INC.

Current Principal Place of Business:

3170 MCMULLEN BOOTH ROAD
CLEARWATER, FL 34621

New Principal Place of Business:

Current Mailing Address:

3170 MCMULLEN BOOTH ROAD
CLEARWATER, FL 34621

New Mailing Address:

FEI Number: 59-2201979

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LUCKIE, THORNTON C
11536 TEE TIME CIRCLE
NEW PORT RICHEY, FL 34654 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: P () Delete
Name: MOORE, BOB
Address: 55 ROGERS ST P-2
City-St-Zip: CLEARWATER, FL 33756

Title: VP () Delete
Name: RUTTER, DAVID
Address: 1878 YALE DRIVE
City-St-Zip: CLEARWATER, FL 33765

Title: TD () Delete
Name: LUCKIE, TONY
Address: 11536 TEE TIME CIRCLE
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: S () Delete
Name: SHULER, ROBERTA
Address: 11801 SNAP DRAGON RD.
City-St-Zip: TAMPA, FL 33635

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: SCHULER, BARBARA
Address: 3037 RAINBOW CT.
City-St-Zip: SAFETY HARBOR, FL 34695

Title: P (X) Change () Addition
Name: RUTTER, DAVID
Address: 1878 YALE DRIVE
City-St-Zip: CLEARWATER, FL 33765

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: T.C. LUCKIE

T/D

04/13/2009

Electronic Signature of Signing Officer or Director

Date