


**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 24, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # 766231**  
 1. Entity Name  
**BAPTIST FELLOWSHIP BIBLE COLLEGE OF TAMPA, INC.**



Principal Place of Business % REVEREND GEORGE SADLER, JR. 505 EAST PALM AVE. TAMPA, FL 33602	Mailing Address % REVEREND GEORGE SADLER, JR. 505 EAST PALM AVE. TAMPA, FL 33602
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**DO NOT WRITE IN THIS SPACE**



04172008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-2347915	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  
 SADLER, GEORGE JR., REV  
 505 EAST PALM AVE.  
 TAMPA, FL 33602

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating)

**Filing Fee Is \$61.25**  
**Due by May 1, 2008**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

U00000920400  
 05/14/08 00042 020 01.25

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	C BOWERS, WALLACE Z 8306 FIR DRIVE TAMPA, FL 33619
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MURRAY SR, RONNIE L 3507 N. 35TH ST TAMPA, FL 33610
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MURRAY, MADISON 3507 N. 36TH STREET TAMPA, FL 33605
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD BANKS, BARTHOLOMEW 9609 WOODLAND RIDGE DRIVE TAMPA, FL 33617
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HUNT, H. 4421 BOOKER T. DRIVE TAMPA, FL 33610
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SADLER, GEORGE W JR 505 E. PALM AVE TAMPA, FL 33602

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12. I hereby certify that the information supplied with this filing 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 other like empowered.

**SIGNATURE:** *George W. Sadler Jr* **4-21-08** (813) 390-0111  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #