

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01287

FILED
Apr 28, 2008
Secretary of State

Entity Name: PEOPLE'S BAPTIST CHURCH OF WEST PASCO, INC.

Current Principal Place of Business:

5238 MILE STRETCH DRIVE
HOLIDAY, FL 34690

New Principal Place of Business:

Current Mailing Address:

5238 MILE STRETCH DRIVE
HOLIDAY, FL 34690

New Mailing Address:

FEI Number: 59-2350018

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FULLER, BARRY J
2301 PARK AVENUE
SUITE 404
ORANGE PARK, FL 32073 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: PRES () Delete
Name: BRENT, NEAL PASTOR
Address: 2746 HEATHGATE WAY
City-St-Zip: LAND O LAKES, FL 34638

Title: VP () Delete
Name: VANDYK, RONALD
Address: 1943 CHRIS DRIVE
City-St-Zip: TARPON SPRINGS, FL 34689

Title: VP () Delete
Name: WARREN, MICAH
Address: 7918 SANCHO CT.
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: DEAC () Delete
Name: SMITH, RODGER
Address: 7227 SHARPSBURG BLVD.
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: DEAC () Delete
Name: STANLEY, WILLIAM
Address: 4237 WOODTRAIL DR.
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: DEAC (X) Delete
Name: JACKSON, MICHAEL
Address: 6255 PATELLA AVE
City-St-Zip: NEW PORT RICHEY, FL 34653

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: NEAL, BRENT PASTOR
Address: 2746 HEATHGATE WAY
City-St-Zip: LAND O LAKES, FL 34638

Title: VP (X) Change () Addition
Name: WARREN, MICAH
Address: 7918 SANCHO CT.
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: DEAC (X) Change () Addition
Name: JACKSON, MIKE
Address: 6255 PATELLA AVE.
City-St-Zip: NEW PORT RICHEY, FL 34653

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

Title: DEAC (X) Change () Addition
Name: WALLACE, CLIFTON
Address: 8419 DUVAL DR.
City-St-Zip: NEW PORT RICHEY, FL 34653

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: BRENT NEAL

PRES

04/28/2008

Electronic Signature of Signing Officer or Director

Date