## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01287

FILED Apr 30, 2009 Secretary of State

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

**Current Principal Place of Business: New Principal Place of Business:** 5238 MILE STRETCH DRIVE HOLIDAY, FL 34690 **Current Mailing Address: New Mailing Address:** 5238 MILE STRETCH DRIVE HOLIDAY, FL 34690 FEI Number: 59-2350018 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FULLER, BARRY J 2301 PARK AVENUE SUITE 404 ORANGE PARK, FL 32073 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition NEAL, BRENT PASTOR Name: Name: 2746 HEATHGATE WAY Address: Address: City-St-Zip: LAND O LAKES, FL 34638 City-St-Zip: Title: () Delete Title: VΡ (X) Change ( ) Addition WARREN, MICAH Name: RODGER, SMITH Name: Address: 7918 SANCHO CT. Address: 7227 SHARPSBURG BLVD City-St-Zip: NEW PORT RICHEY, FL 34653 City-St-Zip: NEW PORT RICHEY, FL 34653 Title: DEAC () Delete Title: () Change () Addition JACKSON, MIKE Name: Name: 6255 PATELLA AVE. Address: Address: City-St-Zip: NEW PORT RICHEY, FL 34653 City-St-Zip: Title: DEAC () Delete Title: SEC (X) Change ( ) Addition Name: SMITH, RODGER Name: TINA, NEAL 7227 SHARPSBURG BLVD. Address: Address: 2746 HEATHGATE WAY City-St-Zip: NEW PORT RICHEY, FL 34653 City-St-Zip: LAND O LAKES, FL 34638 Title: DEAC (X) Delete Title: () Change () Addition WALLACE, CLIFTON Name: Name: 8419 DUVAL DR. Address: Address: City-St-Zip: NEW PORT RICHEY, FL 34668 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 04/30/2009