NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

, DIVISION OF CORPORATIONS

1999 **DOCUMENT # N01706**

1. Corporation Name

TAMPA BAPTIST ACADEMY FOUNDATION, INCORPORATED

Principal Place of Business
%J. JAMES HARTLEY
300 SLIGH AVENUE EAST
TAMPA FL 33604

Suite, Apt. #, etc.

22

2. Principal Place of Business .

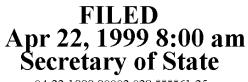
Mailing Address

2a. Mailing Address

27

Suite, Apt. #, etc.

%J. JAMES HARTLEY 300 SLIGH AVENUE EAST TAMPA FL 33604



04-22-1999 90002 028 ****61.25

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3. Date Incorporated or Qualifed

03/01/1984 FEI Number

59-2450485

City & State	9	City & State	u			5. (Certificate of Status Desired			-	ditional
:3		28							Fe	e Requ	uired
Zip	Country	Zip	Cou	ntry		6. E	Election Campaign Financing			00 м	
4	25	29	30			1	Trust Fund Contribution	<u> </u>	Add	ded to	Fees
	9. Name and Address of Current F	Registered Agent				10.	Name and Address of New	Registered .	Agent	_	
		•		81	Name						
J. JAMES	HARTI EY			82	Street Addre	see /P (O. Box Number is Not Accept	table)			
	INGBROOK DR			-	Oli Col / Nodio						
RIVERVIEV	=			83							
THACHTAICA	,				A 11				los I	Zip Co	
•				84	City			FL	85	zip Go	ue
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.											
4.00	Signature, typed or printed name of registered agent a		(NOTE: Registered	Agent	signature required			DATE	D DIOC		0.0140
12.	OFFICERS AND		13.			Al	ODITIONS/CHANGES TO OF	-FICERS AN			
πLE	D ·	DELE.	TE 1.1 Π	Œ					☐ Cha	nge	☐ Addition
NAME	Brannon, Tricia		1.2 NA	ME			•				
STREET ADDRESS	ARREST AND ARREST ARREST			1.3 STREET ADDRESS							
CITY-ST-ZIP	TAMPA FL 140			1.4 CITY-ST-ZIP							
TITLE			TE 2.1 TIT	LE	ļ				Cha	nge	☐ Addition
NAME	DONAHEY, RON		2.2 NA	ME							
STREET ADDRESS	3314 EHRLICH		2.3 ST	REET	ADDRESS						
CITY-ST-ZIP	TAMPA FL		2.4 CI	TY-ST	-ZIP						
TITLE	DP -	DELE	TE 3.1 TΠ	LE			· -		☐ Cha	nge	Addition
NAME	HARTLEY, JAMES		3.2 NA	ME							
STREET ADDRESS	9618 SPRINGBROOK DRIVE	-	3.3 ST	REET	ADDRESS						
CITY-ST-ZIP	RIVERVIEW FL		3.4. C	TY-\$1	-ZIP						
TITLE	DST	☐ DELE	TE 4.1 π1	Œ					☐ Cha	nge	☐ Addition
NAME	SANDERS, WILLIAM		4. 2 N	AME	i						
STREET ADDRESS			4.3 ST	REET	ADDRESS						
CITY-ST-ZIP	TAMPA FL 33618		4.4 CF	TY-ST	-ZIP						
TITLE	VP.	☐ DELE	TE 5.1 TI	ΊE					☐ Cha	nge	☐ Addition
NAME	LLOYD, HERBERT		5.2 NA	ME							
STREET ADDRESS	18719 GERACI, RD.	-	5.3 ST	REET.	ADDRESS						
CITY-ST-ZIP	LUTZ FL		5.4 CI	TY-ST	-ZIP						
TITLE		☐ DELE	TE 6.1 ΤΠ	ΓLE					Cha	nge	Addition
NAME	*		6.2 NA	ME							ł
STREET ADDRESS			6.3 ST	REET	ADDRESS						-
CITY-ST-ZIP			6.4 CF	TY-ST	-ZIP						
14. I hereby o	certify that the information supplied with	this filing does not qua				ection	119.07(3)(i), Florida Statutes	I further cer	ify that	the inf	ormation

indicated on this annual report or supplemental annual 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 12 or Block 13 if changed or on the receiver 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 12 or Block 13 if changed or on the receiver of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes.

SIGNATURE:

CR2E037 (11/98)

Applied For

Not Applicable