


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 16, 2007 08:00 AM**  
**Secretary of State**

DOCUMENT # N01706 1. Entity Name TAMPA BAPTIST ACADEMY FOUNDATION, INCORPORATED	
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Principal Place of Business %J. JAMES HARTLEY 300 SLIGH AVENUE EAST TAMPA, FL 33604	Mailing Address %J. JAMES HARTLEY 300 SLIGH AVENUE EAST TAMPA, FL 33604
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**DO NOT WRITE IN THIS SPACE**



02012007 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-2450485	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
  
J. JAMES HARTLEY  
9618 SPRINGBROOK DR  
RIVERVIEW, FL

**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, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BRANNON, TRICIA 4907 N. FLORIDA AVE TAMPA, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D DONAHEY, RON 3314 EHRlich TAMPA, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP HARTLEY, JAMES 9618 SPRINGBROOK DRIVE RIVERVIEW, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DST SANDERS, WILLIAM 11207 CARROLLWOOD DRIVE TAMPA, FL 33618
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP LLOYD, HERBERT 18719 GERACI, RD. LUTZ, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

U00000768936  
07/16/07-80007-015 61.25

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IN THIS SPACE**

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 or other like empowered.

SIGNATURE: J. J. Hartley  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date \_\_\_\_\_ Daytime Phone # \_\_\_\_\_

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