

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002779

FILED
Mar 24, 2006
Secretary of State

Entity Name: CHURCH OF THE RESURRECTION TAMPA, INC.

Current Principal Place of Business:

6505 N NEBRASKA AVE
TAMPA, FL 33604

New Principal Place of Business:

12720 N. FLORIDA AVENUE
TAMPA, FL 33612

Current Mailing Address:

6505 N NEBRASKA AVE
TAMPA, FL 33604

New Mailing Address:

12720 N. FLORIDA AVENUE
TAMPA, FL 33612

FEI Number: 36-4493761

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARLSON, CHARLES
601 BAYSHORE BLVD., SUITE 700
TAMPA, FL 33606 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: P () Delete
Name: DONLON, KEVIN F
Address: 6505 N NEBASKA AVE
City-St-Zip: TAMPA, FL 33604

Title: VP () Delete
Name: CASTLEBERRY, CAROL
Address: 4616 W LAMB AVE
City-St-Zip: TAMPA, FL 33629

Title: T () Delete
Name: MCCONNELL, W. STEPHEN
Address: 11265 KAPOK GRAND CT
City-St-Zip: SAINT PETERSBURG, FL 33708

Title: S () Delete
Name: WOODBROOK, GRAEME
Address: 17802 RIDGEWAY CT
City-St-Zip: TAMPA, FL 33647

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DONLON, KEVIN F
Address: 12720 N. FLORIDA AVENUE
City-St-Zip: TAMPA, FL 33612

Title: VP (X) Change () Addition
Name: CRANE, MARY ANN MS
Address: 308 S. BUNGELow PARK AVE., APT. D
City-St-Zip: TAMPA, FL 33609

Title: T (X) Change () Addition
Name: LIVINGSTON, JOHN MR
Address: 4423 W. FIG STREET
City-St-Zip: TAMPA, FL 33609

Title: S (X) Change () Addition
Name: COOPER, DOROTHY S MRS.
Address: 7325 BROOKVIEW CIRCLE
City-St-Zip: TAMPA, FL 33634

I hereby certify that the information supplied with this filing does not qualify for the 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: DOROTHY S. COOPER

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03/24/2006

Electronic Signature of Signing Officer or Director

Date