

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002779

FILED
Apr 08, 2008
Secretary of State

Entity Name: CHURCH OF THE RESURRECTION TAMPA, INC.

Current Principal Place of Business:

12720 N. FLORIDA AVENUE
TAMPA, FL 33612

New Principal Place of Business:

Current Mailing Address:

12720 N. FLORIDA AVENUE
TAMPA, FL 33612

New Mailing Address:

FEI Number: 36-4493761

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, LORRAINE
1503 OAKADIA DRIVE, WEST
CLEARWATER, FL 33764 US

Name and Address of New Registered Agent:

FOSTER, DONALD ATTY
3406 W. CARRINGTON STREET
TAMPA, FL 33611 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: DONALD FOSTER

04/08/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

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

Title: VP () Delete
Name: WOODBROOK, GRAEME MR
Address: 17802 RIDGE WAY CT.
City-St-Zip: TAMPA, FL 33647

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: WOODBROOK, GRAEME DR
Address: 17802 RIDGE WAY CT.
City-St-Zip: TAMPA, FL 33647

Title: VP2 (X) Change () Addition
Name: GRELLNER, CYNTHIA ATTY
Address: 18025 PALM BREEZE DRIVE
City-St-Zip: TAMPA, FL 33647

Title: SECT (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 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

SECT

04/08/2008

Electronic Signature of Signing Officer or Director

Date