

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N02000008450

1. Entity Name  
THE LION OF JUDAH CHURCH, INC.



Principal Place of Business  
2921 N 29TH ST  
TAMPA, FL 33605

Mailing Address  
3612 E MCBERRY ST  
TAMPA, FL 33610

**FILED**  
**Sep 03, 2008 08:00 AM**  
**Secretary of State**



08272008 No Chg-NP CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
82-0571479

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**

BRYANT, DEXTER L SR  
3612 E MCBERRY ST  
TAMPA, FL 33610

**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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25  
Due by September 12, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

000000952360  
09/03/08-80005-021 \$1.25

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
P  
BRYANT, DEXTER L  
3612 E MCBERRY ST  
TAMPA, FL 33610

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
T  
BLUE, MARVA  
505 E SPARKMAN AVE  
TAMPA, FL 33602

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
S  
BRYANT, CHRISTINE  
3612 E MCBERRY ST  
TAMPA, FL 33610

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

**DO NOT WRITE  
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 all other like empowered.

**SIGNATURE**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PASTOR

8-27-08

813-237-3807

Date

Daytime Phone #