

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004146

FILED  
Jan 29, 2004  
Secretary of State

Entity Name: EAGLES CHRISTIAN FELLOWSHIP, INC.

**Current Principal Place of Business:**

2801 EAST 17TH AVENUE  
TAMPA, FL 33605 US

**New Principal Place of Business:**

**Current Mailing Address:**

2801 EAST 17TH AVENUE  
TAMPA, FL 33605 US

**New Mailing Address:**

FEI Number: 91-2193512

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LEWIS, MICHEAL W  
2801 EAST 17TH AVENUE  
TAMPA, FL 33605 US

**Name and Address of New Registered Agent:**

WOODY, JAMAAL L  
2801 EAST 17TH AVENUE  
TAMPA, FL 33605 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: JAMAAL WOODY

01/29/2004

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: BOWLES, RITA  
Address: 2801 EAST 17TH AVENUE  
City-St-Zip: TAMPA, F 33605 US

Title: DVP ( ) Delete  
Name: JACKSON, JANNA  
Address: 2801 EAST 17TH AVENUE  
City-St-Zip: TAMPA, FL 33605

Title: DT ( ) Delete  
Name: SHELLMAN, DEDRIC  
Address: 2801 EAST 17TH AVENUE  
City-St-Zip: TAMPA, FL 33605 US

Title: D ( ) Delete  
Name: LEWIS, MICHAEL  
Address: 2801 EAST 17TH AVENUE  
City-St-Zip: TAMPA, FL 33605 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MICHEAL LEWIS

D

01/29/2004

Electronic Signature of Signing Officer or Director

Date