

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004750

FILED
Apr 30, 2007
Secretary of State

Entity Name: TRUE WORSHIP CHRISTIAN CENTER INC.

Current Principal Place of Business:

9340 N. 56TH STREET
110
TEMPLE TERRACE, FL 33617 US

Current Mailing Address:

P.O. BOX 292122
TAMPA, FL 33687 US

New Principal Place of Business:

9340 N. 56TH STREET
C
TEMPLE TERRACE, FL 33617 US

New Mailing Address:

FEI Number: 14-1886237 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOTT, DONALD R JR.
8005 TIERRA VERDE DR.
TAMPA, FL 33617 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: D () Delete
Name: LOTT, DONALD R JR.
Address: 8005 TIERRA VERDE DR.
City-St-Zip: TAMPA, FL 33617 US

Title: D () Delete
Name: LOTT, TIFFANY C
Address: 8005 TIERRA VERDE DR.
City-St-Zip: TAMPA, FL 33617 US

Title: D () Delete
Name: WILSON, VERONICA L
Address: 13101 WHITESTONE DR. APT. A
City-St-Zip: TAMPA, FL 33617 US

Title: D () Delete
Name: RODRIGUEZ, IVORY M
Address: 2006 E. JEAN ST.
City-St-Zip: TAMPA, FL 33610 US

Title: D () Delete
Name: WILLIAMS, STEVE
Address: 9311 ROCKROSE DRIVE
City-St-Zip: TAMPA, FL 33647

Title: D () Delete
Name: WILLIAMS, SONJA
Address: 9311 ROCKROSE DRIVE
City-St-Zip: TAMPA, FL 33647

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:

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

Title: D (X) Change () Addition
Name: WILLIAMS, SONJA
Address: 9311 ROCKROSE DRIVE
City-St-Zip: TAMPA, FL 33647

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: D R LOTT

D

04/30/2007

Electronic Signature of Signing Officer or Director

Date