2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 24, 2009
Secretary of State

DOCUMENT# N05000002246

Entity Name: CHURCH OF GOD (SEVENTH DAY) AT TAMPA, FLORIDA, INC.

Current Principal Place of Business:

6501 WEST NEBRASKA AVENUE
TAMPA, FL 33604 US

New Principal Place of Business:

Current Mailing Address:

1131 LAKEWOOD CIRCLE EAST
LAKELAND, FL 33801 US

New Mailing Address:

FEI Number: 20-2431729 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

AIRTH, HAL A JR
500 SOUTH FLORIDA AVENUE
SUITE 800
LAKELAND, FL 33801 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: DP ( ) Delete
Name: MEDRANO, ELIEZER
Address: 1131 LAKEWOOD CIRCLE EAST
City-St-Zip: LAKELAND, FL 33801 US

Title: DVP ( ) Delete
Name: MEDRANO, JULIAN
Address: 1131 LAKEWOOD CIRCLE EAST
City-St-Zip: LAKELAND, FL 33801 US

Title: DS ( ) Delete
Name: MEDRANO, GENARO
Address: 1131 LAKEWOOD CIRCLE EAST
City-St-Zip: LAKELAND, FL 33801 US

Title: DT ( ) Delete
Name: LOPEZ, ELISABED
Address: 1131 LAKEWOOD CIRCLE EAST
City-St-Zip: LAKELAND, FL 33801 US

Title: D ( ) Delete
Name: ARENAS, JUSTINO
Address: 1131 LAKEWOOD CIRCLE EAST
City-St-Zip: LAKELAND, FL 33801 US

Title: VP ( ) Delete
Name: MEDRANO, SAMUEL
Address: 1131 LAKEWOOD CIRCLE EAST
City-St-Zip: LAKELAND, FL 33801 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:

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 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: ELIEZER MEDRANO DP 08/24/2009

Electronic Signature of Signing Officer or Director — Date