

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2008 8:00 am
Secretary of State

01-31-2008 90030 002 ****61.25

DOCUMENT # N05000005793

1. Entity Name
BAYFRONT CHRISTIAN FELLOWSHIP CHURCH, INC.



Principal Place of Business
**5380 GULF OF MEXICO DRIVE
SUITE 325
LONGBOAT KEY, FL 34228 US**

Mailing Address
**PO BOX710
RIDERWOOD, MD 21139 US**

2. Principal Place of Business - No P.O. Box #
SAME

3. Mailing Address
SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01262008 Chg-NP CR2E037 (12/06)

4. FEI Number
20-2955535

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**CRISTE, HILDEBERT F
5380 GULF OF MEXICO DRIVE
SUITE 325
LONGBOAT KEY, FL 34228**

7. Name and Address of New Registered Agent

Name

N/A

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

HILDEBERT F. CRISTE

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

JANUARY 27, 2008

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **CRISTE, HILDEBERT F**
STREET ADDRESS **5380 GULF OF MEXICO DRIVE - SUITE 325**
CITY - ST - ZIP **LONGBOAT KEY, FL 34228**

TITLE **VPT** ☒ Delete
NAME **PATTON, DAVID D**
STREET ADDRESS **4488 CAMINO REAL**
CITY - ST - ZIP **SARASOTA, FL 34231**

TITLE **VPS** ☒ Delete
NAME **FLEMING, TERRY**
STREET ADDRESS **3660 GULF OF MEXICO DRIVE -STE 302**
CITY - ST - ZIP **LONGBOAT KEY, FL 34228**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

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NAME
STREET ADDRESS
CITY - ST - ZIP

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: HILDEBERT F. CRISTE *Hildebert F. Criste* **JANUARY 27, 2008**

941-383-7220

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #