2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010766

Entity Name: PRAISE FELLOWSHIP TAMPA BAY INC.

FILED Apr 28, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1777 CEDAR WAXWING COURT 2260 HARN BLVD.

PALM HARBOR, FL 34683 CLEARWATER, FL 33764

Current Mailing Address: New Mailing Address:

1777 CEDAR WAXWING COURT P.O. BOX 1196

PALM HARBOR, FL 34683 DUNEDIN, FL 346971196

FEI Number: 20-3597518 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SANTO, ANDREW SCHUELER, MICHAEL A 2260 HARN BLVD.

PALM HARBOR, FL 34683 US CLEARWATER, FL 33764 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: MICHAEL A. SCHUELER 04/28/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:DP () DeleteTitle:DP (X) Change () AdditionName:SCHUELER, MICHAEL AName:SCHUELER, MICHAEL AAddress:2260 HARN BLVDAddress:2260 HARN BLVD

Address: 2250 HARN BLVD Address: 2250 HARN BLVD City-St-Zip: CLEARWATER, FL 33764 City-St-Zip: CLEARWATER, FL 33764

Title: DV () Delete Title: DV (X) Change () Addition Name: SANTO, ANDREW Name: ECKLEY, PAUL W JR.

Address: 1777 CEDAR WAXWING COURT Address: 2701 REGENCY OAKS BLVD. #A-102

City-St-Zip: PALM HARBOR, FL 34683 City-St-Zip: CLEARWATER, FL 33759

Title: DST () Delete Title: (X) Change () Addition ECKLEY, PAUL SACCHETTO, ROBERTO Name: Name: 1316 ISLE OF SKY COURT Address: 2695 AUGUSTA DR Address: CLEARWATER, FL 33761 City-St-Zip: City-St-Zip: DUNEDIN, FL 34698

Title: () Delete Title: DS () Change (X) Addition

 Name:
 Name:
 ASHLEY, TRACY N

 Address:
 Address:
 1310 BLUFFS CIRCLE

 City-St-Zip:
 City-St-Zip:
 DUNEDIN, FL 34698

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: TRACY N. ASHLEY DS 04/28/2008