

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008248

FILED
Apr 29, 2008
Secretary of State

Entity Name: CHANNELSIDE CHURCH, INC.

Current Principal Place of Business:

301 W. PLATT STREET, SUITE 415
TAMPA, FL 33606

New Principal Place of Business:

Current Mailing Address:

C/O TEMPLE H. DRUMMOND, ESQ
6987 EAST FOWLER AVENUE
TAMPA, FL 33617

New Mailing Address:

FEI Number: 26-0835810

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DRUMMOND, TEMPLE H
6987 EAST FOWLER AVENUE
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: SANCHEZ, BILLY J
Address: 28850 RAINDANCE AVENUE
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: D () Delete
Name: FRYE, STEVEN S
Address: 14912 HERONGLEN DRIVE
City-St-Zip: LITHIA, FL 33625

Title: D () Delete
Name: DENIS, MICHEAL
Address: 5807 BROWDER ROAD
City-St-Zip: TAMPA, FL 33625

Title: D () Delete
Name: MARTIN, SCOTT M
Address: 3401 W. HARBOURVIEW AVENUE
City-St-Zip: TAMPA, FL 33611

Title: D () Delete
Name: PACHECO, ANGEL
Address: 17826 LAKE CARLTON DR., APT C
City-St-Zip: LUTZ, FL 33558

Title: () Delete
Name:
Address:
City-St-Zip:

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 () Change (X) Addition
Name: COMELLAS, JERRY
Address: 301 W. PLATT STREET, SUITE 415
City-St-Zip: TAMPA, FL 33617

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: JERRY COMELLAS

D

04/29/2008

Electronic Signature of Signing Officer or Director

Date