

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000009805

FILED  
Apr 17, 2009  
Secretary of State

Entity Name: TAMPABAY CHRISTIAN ASSEMBLY, INC

**Current Principal Place of Business:**

442 TRINIDAD LANE  
LARGO, FL 33770 PI

**New Principal Place of Business:**

**Current Mailing Address:**

442 TRINIDAD LANE  
LARGO, FL 33770 PI

**New Mailing Address:**

FEI Number: 30-0524980      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BEDGOOD, DOUGLAS W  
442 TRINIDAD LANE  
LARGO, FL PINELLAS 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: BEDGOOD, DOUGLAS W  
Address: 442 TRINIDAD LANE  
City-St-Zip: LARGO, FL 33770 PI

Title: D ( ) Delete  
Name: WHITFIELD, DAVID  
Address: 5151 40TH. AVE N.  
City-St-Zip: ST. PETERSBURG, FL 33709 PI

Title: D ( ) Delete  
Name: LUGO, HECTOR  
Address: 2361 NASH ST.  
City-St-Zip: CLEARWATER, FL 33765 PI

Title: S-T ( ) Delete  
Name: BEDGOOD, LOIS V  
Address: 442 TRINIDAD LANE  
City-St-Zip: LARGO, FL 33770 PI

**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:

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: REV. DOUGLAS BEDGOOD

D

04/17/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date