2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2011
Secretary of State

DOCUMENT# N11775

Entity Name: NORTH TAMPA CHRISTIAN FELLOWSHIP, INC.

Current Principal Place of Business:

206 W. 131ST AVE.
TAMPA, FL 33612

New Principal Place of Business:

Current Mailing Address:

4913 HEADLAND HILLS DR.
TAMPA, FL 33624

New Mailing Address:

FEI Number: 59-6176129 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WALCOTT, CARL
4913 HEADLAND HILLS DR.
TAMPA, FL 33624 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: M
Name: WILLIAMS, ROY W REV
Address: 22642 NEWFIELD CT
City-St-Zip: LAND O LAKES, FL 34639

Title: D
Name: WALCOTT, CARL PASTOR
Address: 4913 HEADLAND HILLS DR.
City-St-Zip: TAMPA, FL 33624

Title: SD
Name: CARR, JULIE
Address: 1003 SWEET BREEZE DR.
City-St-Zip: VALRICO, FL 33594

Title: TD
Name: HOSPEDALES, MARCIA
Address: 8053 FAWNRIDGE CIR.
City-St-Zip: TAMPA, FL 33610 US

Title: D
Name: FRANCIS, MOLVERE
Address: 2429 S. ROMONA CIR.
City-St-Zip: TAMPA, FL 33612 US

Title: D
Name: WALCOTT, ANNETTE
Address: 4913 HEADLAND HILLS DR.
City-St-Zip: TAMPA, FL 3362 US

I hereby 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 all other like empowered.

SIGNATURE: CARL WALCOTT D 04/26/2011

Electronic Signature of Signing Officer or Director — Date