

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16591

FILED
Jan 09, 2007
Secretary of State

Entity Name: NORTHSIDE BIBLE CHURCH OF LUTZ, INC.

Current Principal Place of Business:

405 HAYES RD
LUTZ, FL 33549

New Principal Place of Business:

Current Mailing Address:

405 HAYES RD
LUTZ, FL 33549

New Mailing Address:

FEI Number: 59-2272980

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COGGINS, DANIEL R.
405 HAYES RD
LUTZ, FL 33549 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: STD () Delete
Name: DUPREE, DARREL J.,
Address: 12816 LK. MAGDELENE BLVD
City-St-Zip: TAMPA, FL

Title: PD () Delete
Name: COGGINS, DANIEL R.,
Address: 7319 DRIFTING SAND DRIVE
City-St-Zip: WESLEY CHAPEL, FL 33544 US

Title: DT () Delete
Name: MCCORMICK, DERRICK
Address: 14313 HOMOSASSA ST.
City-St-Zip: TAMPA, FL 33613

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: DANIEL R. COGGINS

PD

01/09/2007

Electronic Signature of Signing Officer or Director

Date