

# **2012 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N19781

**FILED**  
**Feb 18, 2012**  
**Secretary of State**

**Entity Name:** SALEM BAPTIST CHURCH, INC.

**Current Principal Place of Business:**

1712 E. BUSCH BLVD.  
TAMPA, FL 33612

**New Principal Place of Business:**

**Current Mailing Address:**

1712 E. BUSCH BLVD.  
TAMPA, FL 33612

**New Mailing Address:**

**FEI Number:** 59-2231910

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SIMMONS, CHARLIE L  
17510 LIVINGSTON AVE.  
LUTZ, FL 33559 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: CHARLIE SIMMONS

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: SIMMONS, CHARLIE  
Address: 17510 LIVINGSTON AVENUE  
City-St-Zip: LUTZ, FL 33549

Title: D  
Name: RHEA, DAVID  
Address: 2011 E. ANNIE  
City-St-Zip: TAMPA, FL 33612

Title: D  
Name: MCINTOSH, THOMAS A.  
Address: 14919 PHILMORE RD  
City-St-Zip: TAMPA, FL

Title: D  
Name: PATTON, MICHAEL  
Address: 17524 LIVINGSTON AVE  
City-St-Zip: LUTZ, FL 33559

Title: D  
Name: MCCLEARY, TED  
Address: 1101 BRISTLEWOOD STREET  
City-St-Zip: BRANDON, FL 33510

Title: D  
Name: GLEATON, JOE  
Address: 722 E. WOOD STREET  
City-St-Zip: TAMPA, FL 33604

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: CHARLIE SIMMONS

PD

02/18/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date