FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 APR 27 AM 11:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N28155 (2)

1. Corporation Name

NORTHSIDE CHURCH OF CHRIST INC. OF TAMPA

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
6906 N. 50TH ST. TAMPA FL 33605	6906 N. 50TH ST. TAMPA FL 33605

3. Date Incorporated or Qualified: 08/31/1988
3a. Date of Last Report: 09/12/1994

4. FEI Number: 59-1326393 — Applied For ☐ Not Applicable ☐

2. Principal Place of Business	21	2a. Mailing Address	26
Na		Na	
Suite, Apt. #, etc.	22	Suite, Apt. #, etc.	27
City & State	23	City & State	28
Zip	24	Zip	29
Country	25	Country	30

5. Certificate of Status Desired ☒ — **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ — **$68.75** Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

DOSS, ERIC
4001 FIELDGREEN PLACE
LAND O LAKES FL 34639

10. Name and Address of New Registered Agent

81 Name: S/N #9
82 Street Address (P.O. Box Number is Not Acceptable):
83
84 City: FL 85 Zip Code:

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Eric Doss Eric Doss Evangelist — 4-24-95 (DATE)
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	DOSS, ERIC	1.2 NAME	
STREET ADDRESS	4001 FIELDGREEN PLACE	1.3 STREET ADDRESS	Same
CITY-ST-ZIP	LAND O LAKES FL 34639	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	☐ Change ☐ Addition
NAME	HAMILTON, HENRY	2.2 NAME	
STREET ADDRESS	4601 E. SERENA DR.	2.3 STREET ADDRESS	Same
CITY-ST-ZIP	TAMPA FL 33617	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	☐ Change ☐ Addition
NAME	ROBERTS, NORMAN	3.2 NAME	
STREET ADDRESS	2104 E 115TH AVE	3.3 STREET ADDRESS	Same
CITY-ST-ZIP	TAMPA FL	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	☐ Change ☐ Addition
NAME	WALKER, GARRETT	4.2 NAME	
STREET ADDRESS	6812 N 18TH ST	4.3 STREET ADDRESS	Same
CITY-ST-ZIP	TAMPA FL	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	☐ Change ☐ Addition
NAME	MOMENT, RUDOLPH	5.2 NAME	
STREET ADDRESS	1723 HARTLEY RD.	5.3 STREET ADDRESS	Same
CITY-ST-ZIP	TAMPA FL	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	☐ Change ☐ Addition
NAME	WILLIAMS, BERNARD	6.2 NAME	
STREET ADDRESS	10102 PINE TRAILS CR	6.3 STREET ADDRESS	Same
CITY-ST-ZIP	TAMPA FL	6.4 CITY-ST-ZIP	

I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] HENRY HAMILTON 4-24-95 (813) 988-1503
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0064436