## 2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

Jul 17, 2009
DOCUMENT# N28155
Secretary of State

Entity Name: NORTHSIDE CHURCH OF CHRIST INC. OF TAMPA

Current Principal Place of Business: New Principal Place of Business:

6906 N. 50TH ST. TAMPA, FL 33605

Current Mailing Address: New Mailing Address:

P O BOX 11612 TAMPA, FL 33680 US

FEI Number: 59-3236393 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

BROWN, DARRELL B 12210 LANGSHAW DRIVE THONOTOSASSA, FL 33592 US

**OFFICERS AND DIRECTORS:** 

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

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## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ( ) Delete Title: CO-D (X) Change ( ) Addition

Name: SUTTLE JAMES T.JR

Name: BROWN DARRELL B

 Name:
 SUTTLE, JAMÉS T JR
 Name:
 BROWN, DARRELL B

 Address:
 3005 23RD AVENUE EAST
 Address:
 12210 LANGSHAW DRIVE

 City-St-Zip:
 TAMPA, FL 33605
 City-St-Zip:
 THONOTOSASSA, FL 33592

 Name:
 SMITH, BRIAN
 Name:
 MOMENT, RUDOLPH

 Address:
 4110 EAST COMANCHE AVENUE
 Address:
 1723 HARTLEY RD.

 City-St-Zip:
 TAMPA, FL 33610
 City-St-Zip:
 TAMPA, FL 33619

Title: PD () Delete Title: () Change () Addition

 Name:
 COLE, OTIS
 Name:

 Address:
 6532 SUMMER COVE DR
 Address:

 City-St-Zip:
 RIVERVIEW, FL 33578
 City-St-Zip:

Title: PT ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 MAMMAH, LAWRENCE
 Name:

 Address:
 3405 NORTH CLAY STREET
 Address:

 City-St-Zip:
 TAMPA, FL 33605
 City-St-Zip:

Title: VPT ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 MCNEAL, CHRIS
 Name:

 Address:
 7531 ARMAND CIRCLE
 Address:

 City-St-Zip:
 TAMPA, FL 33634
 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: LAWRENCE MAMMAH P 07/17/2009