# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT # N34162 1. Entity Name THE EAST BAY CHURCH OF CHRIST, INC. Mailing Address Principal Place of Business PO BOX 5084 14900 S. US 301 WIMAUMA, FL 33598 US SUN CITY CENTER, FL 33571

### **FILED** Jan 22, 2007 08:00 AM Secretary of State



#### DO NOT WRITE IN THIS SPACE

01122007 No Chg-NP CR2E037 (4/06)

| 4. FEI Number     | <br>           | Applied For       |                |
|-------------------|----------------|-------------------|----------------|
| NOT APPI          | ICABLE         |                   | Not Applicable |
| 5. Certificate of | Status Desired | \$8.75 Additional |                |

6. Name and Address of Current Registered Agent

KIMBROUGH, EARL 2212 MALIBU DR. BRANDON, FL 33511

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

|   |   |  |                 |                             | <del> </del>                |                          |         |  |  |  |
|---|---|--|-----------------|-----------------------------|-----------------------------|--------------------------|---------|--|--|--|
| 8. 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. I am familiar with, and accept the obligations of registered agent. |   |  |                 |                             |                             |                          |         |  |  |  |
| SIGNATURE.  | Signature, typed or printed name of registered agent and title if it  | applicable, (NOTE: Registered Agent s.   | gnature reduiii | ed when reinstating)        |                             | DATE                     |         |  |  |  |
| -   | Filing Fee is \$61.25<br>Due by May 1, 2007   | Election Campaign Financing     Trust Fund Contribution.                       |                 | 5.00 May Be<br>ided to Fees |                             |                          |         |  |  |  |
| 10.   | OFFICERS AND DIRECT   | rors .   |                 | ·                           |                             |                          |         |  |  |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   | D<br>KIMBROUGH, EARL<br>2212 MALIBU DR<br>BRANDON, FL   |  |                 |                             |                             |                          |         |  |  |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   | D<br>GUTHRIE. JAMES<br>12203 KELP LANE<br>RIVERVIEW, FL 33569   |  |                 |                             | 0000005951<br>01/23/07-8003 | .03<br>27-002 61.25      |         |  |  |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   | D<br>HARRIS, KARL<br>502 ORANGE LAWN DR<br>VALRICO, FL  |  |                 | DO                          | NOT WR                      | ITE                      |         |  |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY: ST-ZIP   | SD<br>BRAKE, WALLACE T.<br>1915 BOW CT<br>VALRICO, FL   |  |                 | IN                          | THIS SPA                    | CE                       |         |  |  |  |
| TITLE NAME. STREET ADDRESS CITY-ST-ZIP  | PD<br>DUNCAN, THOMAS<br>14005 S HWY 301<br>RIVERVIEW, FL  |  |                 |                             |                             |                          |         |  |  |  |
| DILE NAME STREET ADDRESS- CITY-ST-ZIP   |   |  |                 | ÷ .                         |                             | •<br>• ·                 |         |  |  |  |
| indicated<br>of the cor   | certify that the information supplied with this fill<br>on this report or supplemental report is true ar<br>poration or the receiver or Iruslee empowered<br>or on an attachment with an address, with all of | nd accurate and that my signature shi<br>to execute this report as required by | all have tho    | same legal effe             | ot as it made under oath.   | that Lam an officer or d | irector |  |  |  |