

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36615

FILED  
Aug 30, 2006  
Secretary of State

**Entity Name:** NEW SMYRNA BAPTIST CHURCH OF TAMPA, FLORIDA, INC.

**Current Principal Place of Business:**

5015 17TH ST  
TAMPA, FL 33610 US

**New Principal Place of Business:**

**Current Mailing Address:**

5015 17TH ST  
TAMPA, FL 33610 US

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

STEWART, FRANK S  
3558 N 29TH ST  
TAMPA, FL 33605 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: PD ( ) Delete  
Name: LEE, WILLARD L  
Address: 3021 N 48TH ST APT. A  
City-St-Zip: TAMPA, FL 33605

Title: VD ( ) Delete  
Name: MOORE, LEWIS  
Address: 502 CALHOUN AVE.  
City-St-Zip: SEFFNER, FL 33584

Title: SD ( ) Delete  
Name: WILLIAMS, CARRIE  
Address: 2902 SANCHEZ ST.  
City-St-Zip: TAMPA, FL 33605

Title: SD ( ) Delete  
Name: MCCLARY, ALFREDA  
Address: 1613 E. NOME ST.  
City-St-Zip: TAMPA, FL 33604

Title: TD ( ) Delete  
Name: BYRD, EARLINE  
Address: 3604 E GIDDENS AVE  
City-St-Zip: TAMPA, FL 33610

Title: D ( ) Delete  
Name: PRESLEY, DANIEL  
Address: 5012 N. 19TH ST  
City-St-Zip: TAMPA, FL 33610

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VD (X) Change ( ) Addition  
Name: EDWARDS, JERALDINE  
Address: 126 E. 143RD AVE.  
City-St-Zip: TAMPA, FL 33613

Title: SD (X) Change ( ) Addition  
Name: WILLIAMS, CARRIE  
Address: 3209 E. JEAN STREET  
City-St-Zip: TAMPA, FL 33610

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: BISHOP WILLARD L. LEE

PD

08/30/2006

Electronic Signature of Signing Officer or Director

Date