## N41133

(Requestor's Name)
(Address)
(risarioso)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Social Manuelly)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600130255356

05/27/08--01020--017 \*\*35.00

08 MAY 27 AM III: 42
SECRETARY OF STATE

R.A. Chorg

G. Coutlette MAY 3 0 20

## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: Exciting Central Tampa Baptist Chu (Name of Corporatio	urch
DOCUMENT NUMBER: N41133	
The enclosed Statement of Change of Registered Office/Agent a	and fee are submitted for filing.
Please return all correspondence concerning this matter to the fo	llowing:
Zebadiah E. McKinon (Name of Contact Pers	on)
Exciting Central Tampa Baptist Ch (Firm/Company)	urch
2923 N. Tampa Street (Address)	
Tampa, Florida 33602 (City/State and Zip Co	de)
For further information concerning this matter, please call:	
Jeffrey Singletary at ( 8 (A	13 226-2923 rea Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of S	State.
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of ch	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida S inge is submitted for a corporation organized under the laws of the State of _ er to change its registered office or registered agent, or both, in the State of F.		
1. The name of	the corporation: Exciting Central Tampa Baptist Church		
	office address: 2923 N. Tampa Street		
	Tampa FL 33602		
3. The mailing a	address (if different):		
4. Date of incor	poration/qualification: Document number: N41133		
	d street address of the current registered agent and registered office on file wit timent of State:	h the	,
	Susan Jones	_	
	4805 TRA Rose Court	JAI SI	
	Lutz FL 33558	08 MAY 27 SECRETAR LLAHASS	
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered offi	m̃≺	· Company
	Zebadiah McKinon	AM II: 42 OF STATI E. FLORII	
	4136 Quail Briar Drive	FATE PRICE	
	(PO. Box NOT acceptable)	A	
	Valrico FL 33594	-	
The street address changed will	ess of its registered office and the street address of the business office of its be identical.	s registered ag	gent,
Such change was	as authorized by resolution duly adopted by its board of directors or by an he board, or the corporation has been notified in writing of the change.	officer so	
10 0	Jeffet S.J.C.L.T.A.  The of an officer or director)  (Finited or typed name and to	me) (	
Thereby accept I further agree to of my duties, an document is bei corporation has	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and com d I am familiar with and accept the obligation of my position as registered ng filed merely to reflect a change in the registered office address, I hereb been notified in writing of this change.	plete perform lagent. Or, ij y confirm tha	ance f this t the
Les (Signature)	(nature of Begistered Agent) 5/19/08 (Date)		
If signing on be	half of an entity:		
	yped or Printed Name)		

\* \* \* FILING FEE: \$35.00 \* \* \*