

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 -6 AM 6:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N44775 (7)

1. Corporation Name

CYPRESS LAKE BAPTIST CHURCH OF TAMPA, INC.

Principal Place of Business

Mailing Address

C/O ARTHUR F. NODERER
106 BAYVIEW BLVD.
OLDSMAR FL 34677

13025 NINE EAGLES DRIVE
TAMPA FL 33626
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/21/1991

3a. Date of Last Report

02/14/1994

4. FEI Number

59-3080879

Applied For

Not Applicable

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

2. Principal Place of Business

2a. Mailing Address

21 140 Balsam Dr.

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

City & State

City & State

23

Oldsmar FL

28

Zip

Country

Zip

Country

24

34677

25

USA

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

NODERER, ARTHUR F.
106 BAYVIEW BLVD.
OLDSMAR FL 34677

81 Name

Arthur F. Noderer

82 Street Address (P.O. Box Number is Not Acceptable)

140 Balsam Dr.

83

84 City

Oldsmar

FL

85 Zip Code

34677

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	SAHR, MIKE
STREET ADDRESS	19307 EASTBROOK DR
CITY - ST - ZIP	ODESSA FL
TITLE	D
NAME	LIVINGSTON, BOB
STREET ADDRESS	406 JEFFERSON ST
CITY - ST - ZIP	OLDSMAR FL
TITLE	DP
NAME	BEACH, JOHN
STREET ADDRESS	12502 TWIN BRANCH ACRES
CITY - ST - ZIP	TAMPA FL
TITLE	DV
NAME	THWAITES, RICHARD
STREET ADDRESS	11711 TARPON SPRINGS RD.
CITY - ST - ZIP	ODESSA FL
TITLE	D
NAME	THWAITES, LESLIE
STREET ADDRESS	11711 TARPON SPRINGS RD.
CITY - ST - ZIP	ODESSA FL
TITLE	DS
NAME	WILBORN, CHRIS
STREET ADDRESS	3158 PINE FOREST DRIVE
CITY - ST - ZIP	PALM HARBOR FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY - ST - ZIP	
21 TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY - ST - ZIP	
31 TITLE	☒ Change ☐ Addition
32 NAME	Play Schultze
33 STREET ADDRESS	5416 Fulmar Dr.
34 CITY - ST - ZIP	Tampa FL 33625
41 TITLE	☒ Change ☐ Addition
42 NAME	Arthur F. Noderer
43 STREET ADDRESS	140 Balsam Dr.
44 CITY - ST - ZIP	Oldsmar FL 34677
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Arthur F. Noderer

Date

Signature (Printed)

4/3/95 (813) 285-8229

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