2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47108

FILED Apr 24, 2008 Secretary of State

Entity Name: NEW SALEM MISSIONARY BAPTIST CHURCH OF TAMPA, INC.

Current Principal Place of Business: New Principal Place of Business: 405 N. OREGON AVENUE TAMPA, FL 33606 **Current Mailing Address: New Mailing Address:** 4532 W KENNEDY BLVD #333 TAMPA, FL 33609 FEI Number: 59-2390371 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: BEST, WYNIE K 4532 W. KENNEDY BLVD. #333 TAMPA, FL 33609 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition SPENCER, RUFUS Name: Name: 511 TUSCANNY PARK LOOP Address: Address: City-St-Zip: BRANDON, FL 33511 City-St-Zip: Title: () Delete Title: (X) Change () Addition HUGGINS, JOHN Name: HUGGINS, JOHN Name: Address: 11928 TIMBER HILL DRIVE Address: 11928 TIMBER HILL DRIVE City-St-Zip: TAMPA, FL 33569 City-St-Zip: RIVERVIEW, FL 33569 Title: () Delete Title: () Change () Addition CHERYL, GRAHAM Name: Name: 5617 SAILFISH DRIVE Address: Address: City-St-Zip: **TAMPA, FL 33558** City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: FOSTER, NATALIE Name: SHEARED, LUE ELLA 1805 N. MANHATTAN AVENUE Address: Address: 1315 W. STATE STREET City-St-Zip: TAMPA, FL 33607 City-St-Zip: TAMPA, FL 33606 Title: () Delete Title: () Change () Addition EVANS, DWAYNE Name: Name: 23023 EAGLES WATCH DR Address: Address: City-St-Zip: LAND O LAKES, FL 34639 City-St-Zip: Title: () Delete Title: (X) Change () Addition MCCRAY, LISA D SPEARMAN, BEATRICE Name: Name: Address: 804 W. RIVER HEIGHTS AVENUE Address: 2420 E. EMMA STREET TAMPA, FL TAMPA, FL 33610 City-St-Zip: 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: RUFUS SPENCER P 04/24/2008