

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005211

FILED  
Apr 24, 2009  
Secretary of State

Entity Name: TAMPA REFORMED BAPTIST CHURCH, INC.

## Current Principal Place of Business:

400 E BEARSS AVE  
TAMPA, FL 33613

## New Principal Place of Business:

15935 N. FLORIDA AVE  
TAMPA, FL 33549

## Current Mailing Address:

16710 AUCOIN RANCH ROAD  
LUTZ, FL 33549

## New Mailing Address:

FEI Number: 59-3269551      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

CARTER, GARY L PASTOR  
16710 AUCOIN RANCH ROAD  
LUTZ, FL 33549      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: PT ( ) Delete  
Name: CARTER, GARY L  
Address: 16710 AUCOIN RANCH ROAD  
City-St-Zip: LUTZ, FL 33549

Title: TT ( ) Delete  
Name: BOOKAMER, JAMES B  
Address: 14025 HAPPY HILL RD  
City-St-Zip: DADE CITY, FL 33525

Title: T ( ) Delete  
Name: HEINTZ, ROBERT  
Address: 3232 LAKE PINE WAY EAST  
City-St-Zip: TARPON SPRINGS, FL 34689

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change ( ) Addition  
Name: CARTER, GARY L PASTOR  
Address: 16710 AUCOIN RANCH ROAD  
City-St-Zip: LUTZ, FL 33549

Title: TT (X) Change ( ) Addition  
Name: BOOKAMER, JAMES B TRUSTEE  
Address: 14025 HAPPY HILL RD  
City-St-Zip: DADE CITY, FL 33525

Title: TT (X) Change ( ) Addition  
Name: HEINTZ, ROBERT G TRUSTEE  
Address: 3232 LAKE PINE WAY EAST  
City-St-Zip: TARPON SPRINGS, FL 34689

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: GARY CARTER

PT

04/24/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date