2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004
Secretary of State

DOCUMENT# N94000005418

Entity Name: BAY AREA COMMUNITY CHURCH, INC.

Current Principal Place of Business:

4015 MOUNTAIN SPRINGS LANE
TAMPA, FL 33624 US

New Principal Place of Business:

Current Mailing Address:

4015 MOUNTAIN SPRINGS LANE
TAMPA, FL 33624 US

New Mailing Address:

FEI Number: 59-3291764 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HOGAN, STEVE
4015 MOUNTAIN SPRINGS LANE
TAMPA, FL 33624 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:	D	( ) Delete
Name:	PHELPS, STEVE	
Address:	15142 SPRINGVIEW ST.	
City-St-Zip:	TAMPA, FL 33624	
Title:	C	( ) Delete
Name:	HOGAN, STEVE	
Address:	4015 MOUNTAIN SPRINGS LANE	
City-St-Zip:	TAMPA, FL 33624	
Title:	D	( ) Delete
Name:	MENESES, MARIO	
Address:	1519 EAGLE RIVER WAY	
City-St-Zip:	TAMPA, FL 33624	
Title:	D	( ) Delete
Name:	ROTH, TIM	
Address:	8307 N. NEW PORT	
City-St-Zip:	TAMPA, FL 33604	
Title:	P	( ) Delete
Name:	GALLIGAN, GARY	
Address:	12401 ORANGE GROVE DRIVE #1205	
City-St-Zip:	TAMPA, FL 33618	
Title:	D	( ) Delete
Name:	HARDEE, BRUCE	
Address:	3417 PICWOOD RD.	
City-St-Zip:	TAMPA, FL 33618	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	ROTH, TIM	
Address:	12401 ORANGE GROVE DR., #510	
City-St-Zip:	TAMPA, FL 33618	
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 Section 119.07(3)(i), 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: STEVE HOGAN C 04/26/2004

Electronic Signature of Signing Officer or Director — Date