

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005861

FILED
Apr 25, 2005
Secretary of State

Entity Name: WELLSWOOD BAPTIST HOLDING CO.

Current Principal Place of Business:

5101 NORTH ROME AVE.
TAMPA, FL 33603

New Principal Place of Business:

Current Mailing Address:

5101 NORTH ROME AVE.
TAMPA, FL 33603

New Mailing Address:

FEI Number: 59-0872067

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMELT, JACK
3205 W. SITKA
TAMPA, FL 33614 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: EARNEST, ARTHUR
Address: 4701 WISHART BLVD.
City-St-Zip: TAMPA, FL 33603

Title: D () Delete
Name: FOWLOW, ELIZABETH
Address: 2114 W. FARWELL DRIVE
City-St-Zip: TAMPA, FL 33603

Title: D () Delete
Name: LOPEZ, HENRY
Address: 2120 W. KENTUCKY
City-St-Zip: TAMPA, FL 33607

Title: D () Delete
Name: HALL, HARRY
Address: 1532 W RIVER LANE
City-St-Zip: TAMPA, FL

Title: D () Delete
Name: RAULERSON, LARRY
Address: 12627 NICOLE LANE
City-St-Zip: TAMPA, FL 33625

Title: D () Delete
Name: GARCIA, MARIO
Address: 2401 BAYSHORE BLVD. APT#203
City-St-Zip: TAMPA, FL 33629

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: MACY, ROLAND
Address: 13718 WILKES DR
City-St-Zip: TAMPA, FL 33618

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: PARSONS, RON
Address: 1716 S. ALEXANDER
City-St-Zip: TAMPA, FL 33603

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: MARIO GARCIA

D

04/25/2005

Electronic Signature of Signing Officer or Director

Date