

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2006 8:00 am
Secretary of State

04-19-2006 90097 005 ****61.25

DOCUMENT # N94000005861

1. Entity Name
WELLSWOOD BAPTIST HOLDING CO.



Principal Place of Business
**5101 NORTH ROME AVE.
 TAMPA, FL 33603**

Mailing Address
**5101 NORTH ROME AVE.
 TAMPA, FL 33603**

60028672



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04052006 Chg-NP CR2E037 (11/05)

City & State

City & State

4. FEI Number
59-0872067

Applied For
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SMELT, JACK
 3205 W. SITKA
 TAMPA, FL 33614**

Name **Larry Raulerson**

Street Address (P.O. Box Number is Not Acceptable)
12627 Nicole Lane

City **Tampa** FL Zip Code **33625**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Larry Raulerson*

Larry Raulerson

4-5-06

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
 Due by May 1, 2006**

9. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

**Make check payable to
 Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** Delete
 NAME **EARNEST, ARTHUR**
 STREET ADDRESS **4701 WISHART BLVD.**
 CITY-ST-ZIP **TAMPA, FL 33603**

TITLE **D** Change Addition
 NAME **Jack smelt**
 STREET ADDRESS **3205 W. Sitka**
 CITY-ST-ZIP **Tampa, FL 33614**

TITLE **D** Delete
 NAME **MACY, ROLAND**
 STREET ADDRESS **13718 WILKES DR**
 CITY-ST-ZIP **TAMPA, FL 33618**

TITLE **D** Change Addition
 NAME **Diana Scott**
 STREET ADDRESS **522 Tuscanny Park Loop**
 CITY-ST-ZIP **Brandon, FL 33511**

TITLE **D** Delete
 NAME **LOPEZ, HENRY**
 STREET ADDRESS **2120 W. KENTUCKY**
 CITY-ST-ZIP **TAMPA, FL 33607**

TITLE **D** Change Addition
 NAME **~~Jimmy Sweet~~**

TITLE **D** Delete
 NAME **PARSONS, RON**
 STREET ADDRESS **1716 S. ALEXANDER**
 CITY-ST-ZIP **TAMPA, FL 33603**

TITLE **D** Change Addition
 NAME **Dimmie Sweet**
 STREET ADDRESS **15805 Shillington Dr.**
 CITY-ST-ZIP **Tampa, FL 33624**

TITLE **D** Delete
 NAME **RAULERSON, LARRY**
 STREET ADDRESS **12627 NICOLE LANE**
 CITY-ST-ZIP **TAMPA, FL 33625**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** Delete
 NAME **GARCIA, MARIO**
 STREET ADDRESS **2401 BAYSHORE BLVD. APT#203**
 CITY-ST-ZIP **TAMPA, FL 33629**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Larry Raulerson*

Larry Raulerson

4-5-06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #