

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004069

FILED
Apr 26, 2008
Secretary of State

Entity Name: GOOD NEWS MINISTRIES OF TAMPA BAY, INCORPORATED

Current Principal Place of Business:

1511 CARTER OAKS DRIVE
VALRICO, FL 33594

New Principal Place of Business:

1511 CARTER OAKS DRIVE
VALRICO, FL 33596

Current Mailing Address:

1511 CARTER OAKS DRIVE
VALRICO, FL 33594

New Mailing Address:

1511 CARTER OAKS DRIVE
VALRICO, FL 33596

FEI Number: 65-0604838

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MODICA, RALPH E
1511 CARTER OAKS DRIVE
VALRICO, FL 33594 US

Name and Address of New Registered Agent:

MODICA, RALPH E
1511 CARTER OAKS DRIVE
VALRICO, FL 33596 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:

04/26/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MODICA, RALPH E
Address: 1511 CARTER OAKS DRIVE
City-St-Zip: VALRICO, FL 33594

Title: VD () Delete
Name: MODICA, TERRY A
Address: 1511 CARTER OAKS DRIVE
City-St-Zip: VALRICO, FL 33594

Title: D () Delete
Name: GARDNER, NANCY
Address: 40 EAST JEFFERSON STREET
City-St-Zip: MEDIA, PA 19063

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MODICA, RALPH E
Address: 1511 CARTER OAKS DRIVE
City-St-Zip: VALRICO, FL 33596

Title: VD (X) Change () Addition
Name: MODICA, TERRY A
Address: 1511 CARTER OAKS DRIVE
City-St-Zip: VALRICO, FL 33596

Title: () Change () Addition
Name:
Address:
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: RALPH E. MODICA

PD

04/26/2008

Electronic Signature of Signing Officer or Director

Date