

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Mar 30, 2009
Secretary of State

DOCUMENT# N97000007053

Entity Name: PALM AVENUE BAPTIST CHURCH, INC.**Current Principal Place of Business:**1805 N. FLORIDA AVE.
TAMPA, FL 33602**New Principal Place of Business:****Current Mailing Address:**1805 N. FLORIDA AVE.
TAMPA, FL 33602**New Mailing Address:****FEI Number:** 59-0704734**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ANDREWS, EDWARD R
215 E. PALM AVE. #1207
TAMPA, FL 33602 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: DP () Delete
Name: ANDREWS, EDWARD R
Address: 215 E. PALM AVE. #1207
City-St-Zip: TAMPA, FL 33602

Title: DS () Delete
Name: STRAIN, SALLY H
Address: 4016 W. EL PRADO BLVD.
City-St-Zip: TAMPA, FL 33629

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D () Change (X) Addition
Name: CROSS, RUTH ANN
Address: 1712 FERRIS AVENUE
City-St-Zip: TAMPA, FL 33603

Title: D () Change (X) Addition
Name: DOGBE, JOSEPH
Address: 10010 MEMORIAL HIGHWAY
City-St-Zip: TAMPA, FL 33615

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: SALLY H STRAIN

DS

03/30/2009

Electronic Signature of Signing Officer or Director

Date