2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2005
Secretary of State

DOCUMENT# N98000001709

Entity Name: BIBLE-BASED FELLOWSHIP CHURCH OF TEMPLE TERRACE, INC.

Current Principal Place of Business:

8718 N 46TH STREET
TAMPA, FL 33617

New Principal Place of Business:

Current Mailing Address:

PO BOX 290698
TAMPLE TERRACE, FL 336870698

New Mailing Address:

PO BOX 290698
TEMPLE TERRACE, FL 336870698

FEI Number: 59-3499009 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MASON, EARL B SR
8718 N. 46TH STREET
TAMPA, FL 33617 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:	MASON, EARL B SR	
Address:	P.O. BOX 1720	
City-St-Zip:	SEFFNER, FL 33583	
Title:	D	( ) Delete
Name:	GAY, CAROL	
Address:	2521 E STANLEY MATTHEWS CIRCLE	
City-St-Zip:	TAMPA, FL 33604	
Title:	D	( ) Delete
Name:	COFFEE, MICHAEL	
Address:	3310 CHEVIOT DR	
City-St-Zip:	TAMPA, FL 33618	
Title:	D	( ) Delete
Name:	HUTCHINSON, ANNE	
Address:	4840 WINDINGBROOK TRAIL	
City-St-Zip:	WESTLEY CHAPEL, FL 33543	
Title:	S	( ) Delete
Name:	METCALF, IRIS C	
Address:	5458 PENTAIL CR	
City-St-Zip:	TAMPA, FL 33625	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	GAY, CAROL	
Address:	5830 MEMORIAL HWY APT. 1418	
City-St-Zip:	TAMPA, FL 33615	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
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: IRIS C. METCALF D 01/05/2005
Electronic Signature of Signing Officer or Director — Date