

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 17, 2008 08:00 A**  
**Secretary of State**

DOCUMENT # N98000003114		
1. Entity Name COUNTRYSIDE BAPTIST CHURCH MINISTRIES, INCORPORATED		
Principal Place of Business 2805 REGISTER ROAD FRUITLAND PARK, FL 34731	Mailing Address 2805 REGISTER RD. FRUITLAND PARK, FL 34731	

**DO NOT WRITE IN THIS SPACE**



01072008 No Chg-NP CR2E037 (4/06)

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

**6. Name and Address of Current Registered Agent**

**DO NOT WRITE  
IN THIS SPACE**

STRICKLEN, JOHN W  
13412 COUNTY RD. 200  
OXFORD, FL 34484

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 \_\_\_\_\_

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$81.25  
Due by May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

000000904288  
05/01/08-80006-023 81.25

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D STRICKLEN, JOHN W 13412 COUNTY RD. 200 OXFORD, FL 34484
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D TRETTER, ROBERT 3814 GRIFFIN VIEW LADY LAKE, FL 32159
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D COMBS, TIM 485 HONEYSUCKLE DR. FRUITLAND PARK, FL 34731
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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IN THIS SPACE**

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:** John W. Stricklen / John W. Stricklen 4/14/08 352-315-0220

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #