

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 08, 2007
Secretary of State**

DOCUMENT# N99000005493

Entity Name: DAVIS ISLANDS BAPTIST CHURCH, INC.

Current Principal Place of Business:

97 W. BISCAYNE AVE
TAMPA, FL 33606

New Principal Place of Business:

Current Mailing Address:

97 W. BISCAYNE AVE
TAMPA, FL 33606

New Mailing Address:

FEI Number: 59-3598120 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, DON
97 W. BISCAYNE AVE
TAMPA, FL 33606 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: TR () Delete
Name: BURKS, WAYNE
Address: 4300 W. CYPRESS, SUITE 900
City-St-Zip: TAMPA, FL 33607

Title: TR () Delete
Name: SNYDER, BRUCE
Address: 5221 S CRESCENT DR
City-St-Zip: TAMPA, FL 33611

Title: TR () Delete
Name: KIRKLAND, JACK
Address: 3302 SIERRA CIRCLE
City-St-Zip: TAMPA, FL 33629

Title: S () Delete
Name: JONES, DON
Address: 97 W. BISCAYNE AVE
City-St-Zip: TAMPA, FL 33606

Title: T () Delete
Name: SIVARD, FRANCIS J
Address: 97 W. BISCAYNE AVE
City-St-Zip: TAMPA, FL 33606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: FRANCIS J. SIVARD

T

03/08/2007

Electronic Signature of Signing Officer or Director

Date