

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005493

FILED  
Jan 30, 2009  
Secretary of State

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: WALTER, ROBERT  
Address: 925 ANCHORAGE RD  
City-St-Zip: TAMPA, FL 33602

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: TR (X) Change ( ) Addition  
Name: HAMILTON, MARK  
Address: 1416 S MOODY AVE  
City-St-Zip: TAMPA, FL 33629

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 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

01/30/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date