

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006259

FILED
May 18, 2004
Secretary of State

Entity Name: CHRIST APOSTOLIC CHURCH TAMPA BAY INC.

Current Principal Place of Business:

8301 NORTH 40TH STREET
TAMPA, FL 33604

New Principal Place of Business:

Current Mailing Address:

CHRIST APOSTOLIC CHURCH
P.O. BOX 8005
TAMPA, FL 33674 US

New Mailing Address:

FEI Number: 59-3590992 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADETUTU, ABIDEMI
4322 AKITA DRIVE
TAMPA, FL 33624 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: SOLANKE, MICHAEL
Address: 9342 N. 52ND STREET
City-St-Zip: TAMPA, FL 33617

Title: D () Delete
Name: ISHOLA, BODE
Address: 10109 VISTA POINTE DR.
City-St-Zip: TAMPA, FL 33635

Title: D () Delete
Name: OLODUDE, MICHAEL D
Address: 12318 DAWN VISTA DRIVE
City-St-Zip: RIVERVIEW, FL 33569

Title: D () Delete
Name: DADA, GABRIEL S
Address: 8301 N 40TH STREET
City-St-Zip: TAMPA, FL 33604

Title: D () Delete
Name: ADETUTU, ABIDEMI
Address: 4322 AKITA DRIVE
City-St-Zip: TAMPA, FL 33624

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SOLANKE, MICHAEL
Address: 9342 N. 52ND STREET
City-St-Zip: TAMPA, FL 33617

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

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

Title: D (X) Change () Addition
Name: DADA, GABRIEL S
Address: 8301 N 40TH STREET
City-St-Zip: TAMPA, FL 33604

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: ABIDEMI ADETUTU

SEC

05/18/2004

Electronic Signature of Signing Officer or Director

Date