

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 709641

**FILED  
Jan 21, 2015  
Secretary of State  
CC0554543285**

**Entity Name:** BAYSIDE COMMUNITY CHURCH OF GOD, INC.

**Current Principal Place of Business:**

3380 STATE ROAD 580  
SAFETY HARBOR, FL 34695

**Current Mailing Address:**

3380 STATE ROAD 580  
SAFETY HARBOR, FL 34695

**FEI Number:** 59-1781112

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

DOUGLAS L. HILKERT P.A.  
2557 NURSERY ROAD SUITE A  
CLEARWATER, FL 33764 US

*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:** DOUGLAS L. HILKERT

01/21/2015

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name ERMATINGER, JOHN  
Address 2500 GRANADA CIRCLE E.  
City-State-Zip: ST. PETERSBURG FL 33712

Title DIRECTOR, SECRETARY  
Name HILKERT, DOUGLAS L  
Address 1515 MIDNIGHT PASS WAY.  
City-State-Zip: CLEARWATER FL 33765

Title T  
Name RAGER, BRETT  
Address 12802 TAR FLOWER DR  
City-State-Zip: TAMPA FL 33626

Title D  
Name KING, JORDAN  
Address 700 SEVERS LANDING  
City-State-Zip: PALM HARBOR FL 34683

Title DIRECTOR, PRESIDENT, VC  
Name GRIFFITH, JOHN S  
Address 2485 HICKMAN CIRCLE  
City-State-Zip: CLEARWATER FL 33761

Title DIRECTOR  
Name HENDRICKSON, ANDREW  
Address 8304 TERRACEWOOD CIR.  
City-State-Zip: TAMPA FL 33615

Title DIRECTOR  
Name BEAN, LARRY  
Address 4800 SHEFFIELD DRIVE  
City-State-Zip: NEW PORT RICHEY FL 34655

Title DIRECTOR, VP  
Name ROBERTS, ANGELA  
Address 14230 WATERVILLE CIRCLE  
City-State-Zip: TAMPA FL 33626

**Continues on page 2**

*I hereby 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 all other like empowered.*

**SIGNATURE:** DOUGLAS L. HILKERT

**SECRETARY**

01/21/2015

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title           DIRECTOR  
Name           GLISSON, DIXIE  
Address        5121 MANCHESTER COURT  
                  BLDG. 11, UNIT 103  
City-State-Zip: PALM HARBOR FL 34685

Title           DIRECTOR, CHAIRMAN  
Name           ROLEN, JAMES T. JR.  
Address        1410 NORRIS WAY  
City-State-Zip: TARPON SPRINGS FL 34688