

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14183

Entity Name: NORTHSIDE BAPTIST CHURCH OF DADE CITY, INC.

Current Principal Place of Business:

37047 LOCK ST
DADE CITY, FL 33526

Current Mailing Address:

PO BOX 1578
DADE CITY, FL 33526 US

FEI Number: 59-2350866

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MITCHELL, BRENDA G
10827 OLD LAKELAND HWY
DADE CITY, FL 33525 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title S
Name HOLLOWAY, LORI
Address 10823 OLD LAKELAND HWY
City-State-Zip: DADE CITY FL 33525

Title TR
Name HOLLOWAY, LORI
Address 10823 OLD LAKELAND HWY
City-State-Zip: DADE CITY FL 33525

Title TD
Name SAPP, DOUGLAS W
Address 39145 CLINTON AVE
City-State-Zip: DADE CITY FL 33525

Title TD
Name MITCHELL, BRENDA
Address 10827 OLD LAKELAND HWY
City-State-Zip: DADE CITY FL 33525

Title TR
Name BUTLER, BETTY
Address 36735 TRINA RD
City-State-Zip: DADE CITY FL 33523

Title TR
Name MITCHELL, BRENDA
Address 10827 OLD LAKELAND HWY
City-State-Zip: DADE CITY FL 33525

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: BRENDA MITCHELL

TREASURER

01/02/2013

Electronic Signature of Signing Officer/Director Detail

Date