

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002246

FILED  
Aug 24, 2009  
Secretary of State

Entity Name: CHURCH OF GOD (SEVENTH DAY) AT TAMPA, FLORIDA, INC.

**Current Principal Place of Business:**

6501 WEST NEBRASKA AVENUE  
TAMPA, FL 33604 US

**New Principal Place of Business:**

**Current Mailing Address:**

1131 LAKEWOOD CIRCLE EAST  
LAKELAND, FL 33801 US

**New Mailing Address:**

FEI Number: 20-2431729      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

AIRTH, HAL A JR  
500 SOUTH FLORIDA AVENUE  
SUITE 800  
LAKELAND, FL 33801 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: DP      ( ) Delete  
Name: MEDRANO, ELIEZER  
Address: 1131 LAKEWOOD CIRCLE EAST  
City-St-Zip: LAKELAND, FL 33801 US

Title: DVP      ( ) Delete  
Name: MEDRANO, JULIAN  
Address: 1131 LAKEWOOD CIRCLE EAST  
City-St-Zip: LAKELAND, FL 33801 US

Title: DS      ( ) Delete  
Name: MEDRANO, GENARO  
Address: 1131 LAKEWOOD CIRCLE EAST  
City-St-Zip: LAKELAND, FL 33801 US

Title: DT      ( ) Delete  
Name: LOPEZ, ELISABED  
Address: 1131 LAKEWOOD CIRCLE EAST  
City-St-Zip: LAKELAND, FL 33801 US

Title: D      ( ) Delete  
Name: ARENAS, JUSTINO  
Address: 1131 LAKEWOOD CIRCLE EAST  
City-St-Zip: LAKELAND, FL 33801 US

Title: VP      ( ) Delete  
Name: MEDRANO, SAMUEL  
Address: 1131 LAKEWOOD CIRCLE EAST  
City-St-Zip: LAKELAND, FL 33801 US

**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:

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: ELIEZER MEDRANO

DP

08/24/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date