

FILE NOW: FILING FEE IS \$61.25

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Apr 18 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **710570** (3)  
1. Corporation Name

**ST. MARK'S UNITED METHODIST CHURCH OF ST. PETERSBURG, FL, INC.**



Principal Place of Business	Mailing Address
6801 38TH AVENUE NORTH ST PETERSBURG FL 33710	6801 38TH AVENUE NORTH ST PETERSBURG FL 33710-1421

3. Date Incorporated or Qualified <b>03/22/1966</b>	3a. Date of Last Report <b>03/19/1996</b>
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2. Principal Place of Business	2a. Mailing Address	4. FEI Number <b>59-1534553</b>	Applied For <input type="checkbox"/> Not Applicable
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
22. City & State	27. City & State	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
23. Zip	28. Zip	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	
24. Country	29. Country		

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
LONG, WILLIAM L 2333 FEATHER SOUND DR. #E101 CLEARWATER FL 34622		81. Name <b>RICHARD L. JONES, JR</b>	85. Zip Code <b>33709</b>
		82. Street Address (P.O. Box Number is Not Acceptable) <b>4150-69ST. N.</b>	
		83. City <b>ST. PETERSBURG</b>	
		84. State <b>FL</b>	

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0502, Florida Statutes.

SIGNATURE: **RICHARD L. JONES JR / Richard L. Jones Jr** 1-26-97  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent Signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP <input checked="" type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LONG, WILLIAM L	1.2 NAME	Richard Jones Ch.Tr.
STREET ADDRESS	2333 FEATHER SOUND DR #E101	1.3 STREET ADDRESS	4150 69th St.N.
CITY-ST-ZIP	CLEARWATER FL	1.4 CITY-ST-ZIP	St. Petersburg, FL 33709-4627
TITLE	DS <input checked="" type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MCMILLIN, BETTY	2.2 NAME	Charles Eloshway Tr.
STREET ADDRESS	7288 61ST AVE. N	2.3 STREET ADDRESS	7828 38th Ter. N.
CITY-ST-ZIP	ST PETERSBURG FL 33709	2.4 CITY-ST-ZIP	St. Petersburg, FL 3309
TITLE	D <input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HAMILTON, DAVID	3.2 NAME	Dwight Ferguson Tr.
STREET ADDRESS	12202 68TH ST	3.3 STREET ADDRESS	1699 63rd St. N.
CITY-ST-ZIP	LARGO FL	3.4 CITY-ST-ZIP	St. Petersburg, FL 33710
TITLE	D <input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	FERGUSON, DWIGHT	4.2 NAME	Gloria Huber Tr.
STREET ADDRESS	1699 63RD ST. N.	4.3 STREET ADDRESS	7400 46th Ave. N. L.#245
CITY-ST-ZIP	ST. PETERSBURG FL	4.4 CITY-ST-ZIP	St. Petersburg, FL 33709
TITLE	C <input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ABELL, HARRY	5.2 NAME	Lew Mixell Tr
STREET ADDRESS	9246 78TH PLACE	5.3 STREET ADDRESS	6735 54th Ave. N. Lot #37
CITY-ST-ZIP	SEMINOLE FL	5.4 CITY-ST-ZIP	St. Petersburg, FL 33709
TITLE	D <input checked="" type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CUNNINGHAM, MICHAEL	6.2 NAME	
STREET ADDRESS	5537 18TH AVE NORTH	6.3 STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **RICHARD L. JONES JR / Richard L. Jones Jr** 1-26-97  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE  
(813) 541-8194 work  
(813) 347-8008 Home

CR2E037 (9/96)