

**2003 NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jan 24, 2003 8:00 am**  
**Secretary of State**

01-24-2003 90076 007 \*\*\*\*61.25

**DOCUMENT # 710570**



1. Entity Name  
**ST. MARK'S UNITED METHODIST CHURCH OF ST. PETERS  
BURG, FL, INC.**

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

2. Principal Place of Business      3. Mailing Address

Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State

Zip      Country      Zip      Country

4. FEI Number **59-1534553**      Applied For  
Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional  
Fee Required**



CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**JONES, RICHARD L JR.  
4150 69 ST N  
ST PETERSBURG FL 33709**

7. Name and Address of New Registered Agent

Name **STANLEY PLAGA**  
Street Address (P.O. Box Number is Not Acceptable)  
**5584 56 WAY N.**  
City **ST. PETERSBURG** FL Zip Code **33709**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE STANLEY PLAGA *S. Plaga*      DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOT Registered Agent signature required when reinstating)

**FILE NOW: FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

**Make Check Payable to Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	TRC	<input checked="" type="checkbox"/> Delete
NAME	JONES, RICHARD	
STREET ADDRESS	4150 69 ST N	
CITY-ST-ZIP	ST PETERSBURG FL 33709-4627	
TITLE	TR	<input checked="" type="checkbox"/> Delete
NAME	HART, RUSSELL	
STREET ADDRESS	1533 55 STREET N	
CITY-ST-ZIP	SAINT PETERSBURG FL 33710	
TITLE	TR	<input type="checkbox"/> Delete
NAME	GWYER, READ J	
STREET ADDRESS	8069 29TH AVE N	
CITY-ST-ZIP	SAINT PETERSBURG FL 33710	
TITLE	TR	<input checked="" type="checkbox"/> Delete
NAME	EPRIGHT, BETTY	
STREET ADDRESS	7825 54TH AVENUE #309	
CITY-ST-ZIP	SAINT PETERSBURG FL 33709	
TITLE	TR	<input type="checkbox"/> Delete
NAME	GORMAN, RAYMOND	
STREET ADDRESS	6400 46TH AVENUE #319	
CITY-ST-ZIP	SAINT PETERSBURG FL 33709	
TITLE	TR	<input checked="" type="checkbox"/> Delete
NAME	HUBER, GLORIA	
STREET ADDRESS	7400 46TH AVE N LOT, #245	
CITY-ST-ZIP	ST PETERSBURG FL 33709	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	STANLEY PLAGA	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	5584 56 WAY N.	
STREET ADDRESS	ST. PETERSBURG, FL 33709	
CITY-ST-ZIP		
TITLE	E. J. McCrary	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	6855 38 AVE. N.	
STREET ADDRESS	ST. PETERSBURG, FL 33710	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	AL BOUCHARD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	3251 19th ST. N.	
STREET ADDRESS	ST. PETERSBURG, FL 33713	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	George Robespierre	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	6260 46 AVE. N.	
STREET ADDRESS	ST. PETERSBURG, FL 33709	
CITY-ST-ZIP		

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **SIGNATURE REQUIRED** *S. Plaga*

CR2E037 (10/02)