


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 91230 028 ****61.25

DOCUMENT # 717317

1. Entity Name
ST. PETERSBURG COIN CLUB, INC.



Principal Place of Business
**CHRIST LUTHERAN CHURCH
 3451 30TH AVE. NO.
 ST. PETERSBURG, FL 33713 US**

Mailing Address
**P.O BOX 48561
 ST. PETERSBURG, FL 33743**



2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State

Zip Country

04302004 Chg-NP CR2E037 (10/03)

4. FEI Number
59-2417390

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**WILEY, ROBERT
 3603 50TH AVENUE NORTH
 SAINT PETERSBURG, FL 33713**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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 on File

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25 Due by May 1, 2004

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 | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | |
|--|---|---|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D BAKER, BILL 6800 17ST S ST PETESBURG, FL <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | Director Lin Overholt P.O. Box 8481 Maderia Bch, FL 33738 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V SLAG, STEPHEND 5235 20 ST NO ST. PETERSBURG, FL <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | Vice President Jack Schuster 8217-127 Lane Seminole, FL 33776 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | S HESTER, JAYNE 5015 58TH AT. NE KENNETH CITY, FL 33709 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | Treasurer Jayne Hester 5015-58 St. N. Kenneth City, FL 33709 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P WILEY, ROBERT 3603 50TH AVENUE NORTH SAINT PETERSBURG, FL 33714 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | Secretary Nina Miller 8217-127 Lane Seminole, FL 33776 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T PENDLEY, BRENDA J 3840 61 ST N ST. PETERSBURG, FL <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | Director Brenda Pendley 3840-61 St. N. St. Pete, FL 33710 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D THOMPSON, ROBERT S 9985 56TH PLACE NO ST PETERSBURG, FL 33708 <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | Director Bob Steel 4130-26 Ave N. St. Pete, FL 33714 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |

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: Jayne Hester 4-29-04 727-403-8662

Signature and typed or printed name of signing officer or director Date Daytime Phone #