

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

**FILED**  
**Mar 20, 2003 8:00 am**  
**Secretary of State**

03-20-2003 90120 018 \*\*\*\*61.25

**DOCUMENT # 731806**

1. Entity Name

**WESTMINSTER UNITED PRESBYTERIAN CHURCH, INC. OF  
ST. PETERSBURG**



Principal Place of Business

**126 - 11TH AVE. N. E.  
ST. PETERSBURG FL 33701**

Mailing Address

**126 - 11TH AVE. N. E.  
ST. PETERSBURG FL 33701**

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 **59-0662282**

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

**YOUNG, ED  
860-29TH AVE N  
ST. PETERSBURG FL 33704**

7. Name and Address of New Registered Agent

Name **DAVID P. KEISTER, SR.**

Street Address (P.O. Box Number is Not Acceptable)  
**181 74<sup>th</sup> AVE N.**

City **ST. PETERSBURG**

FL

Zip Code  
**33702**

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: *David P. Keister, Sr.* **DAVID P. KEISTER, SR.** **3-10-03**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**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 NAME STREET ADDRESS CITY-ST-ZIP	<b>PD YOUNG, EDWIN 860 29 AVE. NORTH SAINT PETERSBURG FL 33704</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SD DEAN, GEORGIA 165 12TH AVENUE NE SAINT PETERSBURG FL 33701</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TD QUINN, JULIA 136 10 AVENUE NE ST PETERSBURG FL 33701</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>ATD LIPSETT, AGNES 4920 LOCUST STREET NE #214 SAINT PETERSBURG FL 33703</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VD LEWIS, CHARLOTTE 4094 POPLAR STREET NE SAINT PETERSBURG FL 33703</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD LEWIS, CHARLOTTE 4094 POPLAR ST. N.E. ST. PETERSBURG, FL 33703</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TD LIPSETT, AGNES 4920 LOCUST ST. N.E. #214 ST. PETERSBURG, FL 33703</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>ATD REEDER, JEANNE 1100 NORTH SHORE DR. N.E. #204 ST. PETERSBURG, FL 33701</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VD DONELSON, PAUL 5216 35<sup>th</sup> TERRACE N. ST. PETERSBURG, FL 33710</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input 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: *Jeanne Reeder* **JEANNE REEDER** **3/10/03** **821-5259**

CR2E037 (10/02)