

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

FILED
Apr 24, 2003 8:00 am
Secretary of State

04-24-2003 90217 022 ****61.25

DOCUMENT # 738293

1. Entity Name

THE WOODLAWN PRESBYTERIAN CHURCH, OF ST. PETERSBURG FLORIDA, INC.



Principal Place of Business
**2612 12TH STREET NORTH
ST. PETERSBURG FL 33704-2610**

Mailing Address
**2612 12TH STREET NORTH
ST. PETERSBURG FL 33704-2610**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-0799929**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FRAZIER, GARY E.
150 2ND AVE., N.
STE 910
ST. PETERSBURG FL 33710**

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 _____ (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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** Delete
NAME **HUBER, DOROTHY**
STREET ADDRESS **3528 9TH ST N**
CITY-ST-ZIP **SAINT PETERSBURG FL 33704**

TITLE **D** Change Addition
NAME **HUBER, DOROTHY**
STREET ADDRESS **103 AMERICANA COURT N.E.**
CITY-ST-ZIP **ST. PETERSBURG, FL 33702**

TITLE **D** Delete
NAME **SIEDLECKI, WENDY**
STREET ADDRESS **2445 WOODLAWN CIR E**
CITY-ST-ZIP **SAINT PETERSBURG FL 33704**

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **S** Delete
NAME **C. JAMES WOOD**
STREET ADDRESS **1400 32ND AVENUE. N.**
CITY-ST-ZIP **ST. PETERSBURG FL**

TITLE **P** Change Addition
NAME **C. JAMES WOOD**
STREET ADDRESS **1400 32nd. AVENUE NO.**
CITY-ST-ZIP **ST. PETERSBURG, FL 33704**

TITLE **T** Delete
NAME **METZLER, PEGGY**
STREET ADDRESS **4322 -10TH ST N.**
CITY-ST-ZIP **SAINT PETERSBURG FL 33703**

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **P** Delete
NAME **STEVENS, JEAN**
STREET ADDRESS **1221 KENWOOD AVE N.**
CITY-ST-ZIP **ST. PETERSBURG FL**

TITLE **S** Change Addition
NAME **STEVENS JEAN**
STREET ADDRESS **650 MT. KEY AVENUE N.E.**
CITY-ST-ZIP **ST. PETERSBURG, FL 33702**

TITLE **D** Delete
NAME **HILL, JOHN W**
STREET ADDRESS **424 MT OAK AVE NE**
CITY-ST-ZIP **SAINT PETERSBURG FL 33702**

TITLE Change Addition
NAME
STREET ADDRESS
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: *John W Hill* **4/17/03** **727/527-8593**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR20037 (4/03)