

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 30 AM 9:23

DOCUMENT # 703350 (9)
1. Corporation Name
CENTRAL CHRISTIAN CHURCH OF ST. PETERSBURG, INC.

Principal Place of Business Mailing Address
4824 SECOND AVENUE SOUTH 4824 SECOND AVENUE SOUTH
ST PETERSBURG FL 33711-1016 ST PETERSBURG FL 33711-1016

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 12/18/1961 3a. Date of Last Report 01/25/1994
4. FEI Number 59-0818913 Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ \$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 25 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent

CHAMBLIN, ERNEST
6357 3RD AVE SOUTH
ST. PETERSBURG FL 33707

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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, hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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

(NOTE: Registered Agent signature required when reappointing)

DATE 1/25/95

12. OFFICERS AND DIRECTORS

TITLE VD
NAME PONELEIT, JACK
STREET ADDRESS 4488 32ND TERR. N.
CITY-ST-ZIP ST. PETERSBURG FL
TITLE TD
NAME TURNER, BOB
STREET ADDRESS 5617 97 WAY NO
CITY-ST-ZIP ST. PETERSBURG FL
TITLE SD
NAME CARTER, CHUCK
STREET ADDRESS 6132 7TH AVE SOUTH
CITY-ST-ZIP ST PETERSBURG FL
TITLE PD
NAME CHAMBLIN, ERNEST
STREET ADDRESS 6357 3RD AVE S.
CITY-ST-ZIP ST. PETERSBURG FL
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE SD
1.2 NAME PONELEIT, JACK.
1.3 STREET ADDRESS 4488. 32nd TERR NO
1.4 CITY-ST-ZIP ST PETERSBURG FLA
2.1 TITLE TD.
2.2 NAME DAVID OLIVER.
2.3 STREET ADDRESS 5964 - 5TH AVE SOUTH
2.4 CITY-ST-ZIP ST PETERSBURG - FLA
3.1 TITLE VD.
3.2 NAME CHUCK CARTER
3.3 STREET ADDRESS 6132. 7TH AVE SOUTH
3.4 CITY-ST-ZIP ST PETERSBURG FLA
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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: ERNEST CHAMBLIN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

DATE/TIME (TWO)

813-321-4900