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Feb 03 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **704056** (1)

1. Corporation Name

GARDEN CREST PRESBYTERIAN CHURCH (USA), INCORPORATED IN ST. PETE., FL

Principal Place of Business

Mailing Address

5901 9TH AVENUE NORTH
ST. PETERSBURG FL 33710

5901 9TH AVENUE NORTH
ST. PETERSBURG FL 33710

3. Date Incorporated or Qualified

05/17/1962

4. FEI Number

59-0939909

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

24 Zip

25 Country

28 Zip

30 Country

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. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PENNINGTON, ROBERT E.
1235 80TH ST., SOUTH
ST. PETERSBURG FL 33707

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 617.0502 and 617.1508, 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	C	<input type="checkbox"/> DELETE
NAME	PENNINGTON, ROBERT E.	
STREET ADDRESS	1235 80TH ST. SOUTH	
CITY-ST-ZIP	ST PETERSBURG FL	

TITLE	T	<input checked="" type="checkbox"/> DELETE
NAME	CARROLL, DIANNE E	
STREET ADDRESS	1244 COUNTRY CLUB RD N	
CITY-ST-ZIP	ST PETERSBURG FL	

TITLE	T	<input checked="" type="checkbox"/> DELETE
NAME	BECKMEYER, BARBARA	
STREET ADDRESS	1729 65TH ST NO.	
CITY-ST-ZIP	ST. PETERSBURG FL	

TITLE	T	<input type="checkbox"/> DELETE
NAME	GOMEZ, ALFONSO L	
STREET ADDRESS	2050 45TH ST N	
CITY-ST-ZIP	ST PETERSBURG FL 33713	

TITLE	T	<input checked="" type="checkbox"/> DELETE
NAME	WILLIAMS, JEFFREY M.	
STREET ADDRESS	7328 7TH AVENUE N.	
CITY-ST-ZIP	ST PETE FL	

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	

2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Alexander, Robert W.
2.3 STREET ADDRESS	5443 17th Ave. N.
2.4 CITY-ST-ZIP	St. Petersburg, FL 33710

3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	T
3.3 STREET ADDRESS	Moore, John B., Jr.
3.4 CITY-ST-ZIP	3167 62nd St. N. St. Petersburg, FL 33710

4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	

5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	D
5.3 STREET ADDRESS	Kinsella, Eugene T.
5.4 CITY-ST-ZIP	6200 34th Ave. N. St. Petersburg, FL 33710

6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 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:  **Eugene T. Kinsella(D)** Jan. 9, 1998 813-381-7498

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 813-381-7498

CR2E037 (10/97)