2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

May 03, 2005 8:00 am Secretary of State DOCUMENT # 705858 1. Entity Name 05-03-2005 90065 046 ****61.25 THE AMERICAN BAPTIST CHURCH OF THE BEATITUDES OF ST. PETERSBURG, FLORIDA, INC. Principal Place of Business Mailing Address 2812 8TH ST N 2812 8TH ST N ST PETERSBURG FL 33704 ST PETERSBURG FL 33704 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (10/04) 1st MOORE City & State City & State Applied For 59-1890630 Not Applicable 7in Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MILLER-EVANS J. PHILLIP Street Address (P.O. Box Number is Not Acceptable) 771 34TH AVE. N. SAINT PETERSBURG FL 33704 City 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' 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 Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2005 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 MODERATOR - PRES, TRUSTEL & Change | BILL SHAFFER 10. OFFICERS AND DIRECTORS 11. TITLE Delete TITLE MALINSKI, LUCIE NAME NAME 856 42ND AVE N. STREET ADDRESS STREET ADDRESS SAINT PETERSBURG FL 33703 CITY-ST-ZIP ST. PETERS BURG, FL 33704 FINANCIAL SEC. - TRUSTEED Change Addition CITY-ST-7IP FTTR TITLE Delete TITLE DECKER, CLAUDIA DONNA LARUE 5801 VENETIAN BLVD, WE NAME NAME 461 12TH AVE, N. STREET ADDRESS STREET ADDRESS 5801 SAINT PETERSBURG FL 33701 CITY-ST-ZIP CITY-ST-ZIP T. PETERS BURG, EL TTR TREASURER - TRUSTEE Delete THE Change Change [] Addition FRANK PAVIS NOREN, DIANNE NAME 3926 961 Due. N 16310 WORCHESTER PALMS CRT. STREET ADDRESS STREET ADDRESS **TAMPA FL 33644** CITY-ST-71P CITY-ST-ZIP ST. PETERS BURG FL STR TITLE ☐ Delete TITLE ☐ Addition MCGRATH, RUTH NAME 830 N. SHORE NE #9=によー1 STREET ADDRESS STREET ADDRESS SAINT PETERSBURG FL 33701 CITY-ST-ZIP CITY-ST-ZIP TITLE Detete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Defete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

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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: SIGNATURE AND TYPED OR FRINTED NAME OF SIGNING OFFICER OR DIRECTOR