

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

APPROVED
07-24-2006 90001 027 ****70.00
FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
JSC

DOCUMENT # 705858					
1. Entity Name THE AMERICAN BAPTIST CHURCH OF THE BEATITUDES OF ST. PETERSBURG, FLORIDA, INC.					
Principal Place of Business 2812 8TH ST N ST PETERSBURG, FL 33704			Mailing Address 2812 8TH ST N ST PETERSBURG, FL 33704		
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 59-1890630	
				Applied For ☐ Not Applicable	
				5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MILLER-EVANS J. PHILLIP 771 34TH AVE. N. SAINT PETERSBURG, FL 33704				7. Name and Address of New Registered Agent	
				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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renouncing)					
DATE _____					
Filing Fee is \$61.25 Due by September 6, 2006		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	PTR	☒ Delete	TITLE	PRESIDENT	☐ Change ☒ Addition
NAME	SHAFFER, BILL		NAME	CHARLES M. NOREN	
STREET ADDRESS	2812 8TH STREET N		STREET ADDRESS	16310 WORCHESTER PALMS CT	
CITY-ST-ZIP	SAINT PETERSBURG, FL 33704		CITY-ST-ZIP	TAMPA, FL 33647	
TITLE	STR	☒ Delete	TITLE	VIC. PRESIDENT	☐ Change ☒ Addition
NAME	LARUE, DONNA		NAME	GREG FANNING	
STREET ADDRESS	5801 VENETIAN BLVD		STREET ADDRESS	1855 16TH AVE N.	
CITY-ST-ZIP	SAINT PETERSBURG, FL 33704		CITY-ST-ZIP	ST. PETERSBURG, FL 33704	
TITLE	TTR	☒ Delete	TITLE	SECRETARY	☐ Change ☒ Addition
NAME	DAVIS, FRANK		NAME	LUCILLE MALINSKE	
STREET ADDRESS	3926 96TH AVENUE N		STREET ADDRESS	856 43RD AVENUE	
CITY-ST-ZIP	SAINT PETERSBURG, FL 33714		CITY-ST-ZIP	ST. PETERSBURG, FL 33703	
TITLE	STR	☒ Delete	TITLE	TREASURER	☐ Change ☒ Addition
NAME	MCGRATH, RUTH		NAME	DIANNE M. NOREN	
STREET ADDRESS	830 N. SHORE NE #3-I		STREET ADDRESS	16310 WORCHESTER PALMS CT	
CITY-ST-ZIP	SAINT PETERSBURG, FL 33701		CITY-ST-ZIP	TAMPA, FL 33647	
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <u>Charles M. Noren</u>				Date: <u>8/3-286-1069</u>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

Document corrected per Rev. Miller - Evans. JSC