

DOCUMENT # 706352

Entity Name

CHRISTIAN ASSEMBLY OF ST. PETERSBURG, INC

FILED
Sep 21, 2001 8:00 am
Secretary of State

09-21-2001 90001 009 ****70.00

Principal Place of Business	Mailing Address
195 PROPHETS PKWY SANTA ROSA BEACH FL 32459	146 MAGNOLIA CREEK RD SANTA ROSA BEACH FL 32459

Principal Place of Business	Mailing Address
195 PROPHETS PKWY Suite, Apt. #, etc.	146 MAGNOLIA CREEK RD Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State	City & State	4. FEI Number	Applied For
SANTA ROSA BEACH FL	SANTA ROSA BEACH FL	593223726	Not Applicable
Zip	Zip	5. Certificate of Status Desired	\$8.75 Additional Fee Required
32459	32459	☒	
Country	Country		
USA	USA		

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JAMES A CAPO JR.
502 BELLWORTH AVE N.W.
JENSEN BEACH FL 34957

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reissuing)

DATE

9. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
PD	CAPO JAMES	146 MAGNOLIA CREEK RD	SANTA ROSA BEACH FL 32459	PD	CAPO JAMES A. SR	146 MAGNOLIA CREEK RD	SANTA ROSA BEACH FL 32459
D	CAPO, I DA	329 OLIVIA VONPORT PA 15069					
TSD	CAPO, JAMES JR	2902 MELALEUCA PORT ST LUCIE FL	34952	TSD	CAPO JAMES JR	502 BELLWORTH AVE N.W.	JENSEN BEACH FL 34957
D	JENNIFER CAPO	2902 3RD MELALEUCA	PORT ST LUCIE FL 34952	D	CAPO JENNIFER	502 BELLWORTH AVE N.W.	JENSEN BEACH FL 34957

2. 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 president 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 changed, or on any attachment with an address, with all other like information.

SIGNATURE

James A. Capo

9/29/01

80-622-2722

Attachment
706352
979542

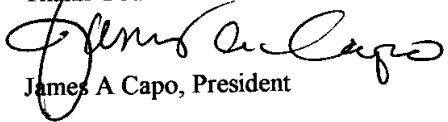
Date August 31, 2001
146 Magnolia Creek Rd
Santa Rosa Beach Fl 32459
UBR Document #706352,

Dear Legislator,

This report filed was filed 4/29/01.

Please send us a certified copy of the UBR for our files.

Thank You


James A Capo, President