

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 22 PM 3:48

DOCUMENT # 706525 (3)

1. Corporation Name

NORTHSIDE METHODIST CHURCH OF ST. PETERSBURG, IN
C.

Principal Place of Business

Mailing Address

4344-21ST STREET NORTH
ST PETERSBURG FL 33714

4344-21ST STREET NORTH
ST PETERSBURG FL 33714

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 3a. Date of Last Report

12/06/1963

03/10/1994

4. FEI Number

59-0914211

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.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip Country

25

29 Zip Country

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LEWIS, REV. CHARLOTTA B.
4344 21ST STREET NO.
ST PETERSBURG FL 33714

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

FL B5 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reconstituting)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME HARDT, LYNN
STREET ADDRESS 2428 18TH AVENUE NORTH
CITY-ST-ZIP ST PETERSBURG, FL 0

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE D
NAME SMITH, RUTH
STREET ADDRESS 2127 43RD TERR NO.
CITY-ST-ZIP ST PETERSBURG, FL 0

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

D Larry Heffern
Larry Heffern
532 Highland St. No.
St. Petersburg, FL 33701

☒ Change ☐ Addition

TITLE D
NAME LEWIS, SAME
STREET ADDRESS 4320 21 ST N
CITY-ST-ZIP ST. PETERSBURG FL

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE C
NAME SAMS, CHESTER
STREET ADDRESS 4177 QUEEN ST., NORTH
CITY-ST-ZIP ST PETERSBURG, FL 0

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE D
NAME SHOWELL, HILDA
STREET ADDRESS 742 43RD AVE, NE
CITY-ST-ZIP ST PETERSBURG FL

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE C
NAME HARTELL, SHERRY
STREET ADDRESS 7014 ORPINE ST
CITY-ST-ZIP ST PETERSBURG FL

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

C Glenn Connolly
4326 22nd St. No.
St. Petersburg, FL 33714

☒ Change ☐ Addition

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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

Donald W. Grover, Treas.

SIGNATURE:

Donald W. Grover
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/16/95 (813) 546-0354
Date Daytime Phone #