

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2006 08:00 AM
Secretary of State

DOCUMENT # 709016

1. Entity Name
ST. LUKE A.M.E. CHURCH, INCORPORATED



Principal Place of Business
**2709-N 25TH ST
TAMPA, FL 33605**

Mailing Address
**2709-N 25TH ST
TAMPA, FL 33605**



04302006 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
70-9016392

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**BURKE, MARCUS H JR
2709 N. 25TH STREET
TAMPA, FL 33605**

**DO NOT WRITE
IN THIS SPACE**

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

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

U00000561752
05/19/06-80027-009 61.25

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	HALL, MARILYN C
STREET ADDRESS	2110 WARNELL ST
CITY-ST-ZIP	PLANT CITY, FL 33566
TITLE	DT
NAME	MCCRAY, SHIRL
STREET ADDRESS	2310 FOURTH AVE
CITY-ST-ZIP	TAMPA, FL 00000,
TITLE	TR
NAME	JAMES, EARL
STREET ADDRESS	3606 RIVER GROVE DR.
CITY-ST-ZIP	TAMPA, FL
TITLE	DS
NAME	WILSON, CURTISS
STREET ADDRESS	3117 18TH AVENUE
CITY-ST-ZIP	TAMPA, FL
TITLE	D
NAME	THOMAS, DEBORAH
STREET ADDRESS	2905 E HOWELL AVE
CITY-ST-ZIP	TAMPA, FL 00000,
TITLE	P
NAME	BURKE, MARCUS H JR
STREET ADDRESS	2709 N. 25TH STREET
CITY-ST-ZIP	TAMPA, FL 33605

**DO NOT WRITE
IN THIS SPACE**

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 attached page with an address with which I am empowered.

SIGNATURE: *M.H. Burke Jr.* **M.H. Burke Jr.** **4/30/06** **813.248.6753**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #