2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 26, 2004 8:00 am Secretary of State

DOCUMENT # 709159 1. Entity Name LEALMAN METHODIST CHURCH OF ST. PETERSBURG, FLORIDA, INC.							!	04-26-200	_	7 022 ****	*70.00
Principal Place of Business Mailing Address 4090 58TH AVENUE NORTH 4090 58TH AVENUE NORTH ST. PETERSBURG, FL 33714 ST. PETERSBURG, FL 33714					<u>-</u>	-			- 4 U	ባባ ፗፎ	
2. Principal Place of Business			3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc			01172004	Chg-NP	CR2E	037 (10/03)		
City & State			City & State			4. FEI Numbe 59-079	1033	· · · · ·		pplied For ot Applicable	
Zip	Zip Country		Zip	Co	Country		5. Certificate	of Status Desired	Æ	\$8.75 Ad Fee Require	
-6. Name and Address of Current Registered Agent					=	7. Name and Address of New Registered Agent					
CLEVENGER, DAVID M					Name /	TIME AND AND A					
11284 67T	TH AVE N						O. Box Number	9),			
SEMINOLE, FL 33772						<u>~</u>	- <u>re</u>				
City						T. P	ETERO	BURGI	FI	L Zp Coo	ie 7 14/
8. The above	named entity	y submits this statement lo	r the purpose of changir	g its register	red office or		ed agent, or bot	n, in the State of Fk	orida. I an	n familiar with	and accept
the obligati	tions of regist	ered agent.			س بو	•				1.1	,
SIGNATURE Dames L. Haugh TRUSTE									41	(14/0)	4.
	Signature, typed	or printed name of registered agent/			 						
* .*		or burner usue or redermed adeas	and title if epplicable.	(NOTE: Register	ed Agent eignatu	re naquined	when reinstating)		BATE	,	
AND THE RESERVE	Filing Fe	e is \$61.25 lay 1, 2004	9. Election	(NOTE: Register Campaign ! Und Contribu	Financing		\$5.00 May Bo			ck payable i	
10.4	Filing Fe	e is \$61.25	9. Election Trust Fi	Campaign !	Financing tion.		\$5.00 May Bo Added to Fees		ida Depa	irtment of S	tate .
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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.

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

JAMES L. HAUGHY 727 5256503 Davtime Phone #