

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709159

FILED
Jan 08, 2009
Secretary of State

Entity Name: LEALMAN METHODIST CHURCH OF ST. PETERSBURG, FLORIDA, INC.

Current Principal Place of Business:

4090 58TH AVENUE NORTH
ST. PETERSBURG, FL 33714

New Principal Place of Business:

Current Mailing Address:

4090 58TH AVENUE NORTH
ST. PETERSBURG, FL 33714

New Mailing Address:

FEI Number: 59-0791033

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEHMAN, REBECCA L
4195 57TH AVENUE N
SAINT PETERSBURG, FL 33714 US

Name and Address of New Registered Agent:

AIKINS, CHARLES
3663 58TH AVENUE N
450
SAINT PETERSBURG, FL 33714 US

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: CHARLES AIKINS

01/08/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VC () Delete
Name: AIKENS, CHARLES
Address: 3663 58TH AVENUE N #450
City-St-Zip: SAINT PETERSBURG, FL 33714

Title: TC () Delete
Name: LEHMAN, REBECCA
Address: 4195 57TH AVE. N
City-St-Zip: SAINT PETERSBURG, FL 33714

Title: P () Delete
Name: DEGGINGER, JUDY
Address: 7186 62ND AVENUE N
City-St-Zip: PINELLAS PARK, FL 33781

Title: T () Delete
Name: HOLTON, CAROL
Address: 3911 47TH AVE. N
City-St-Zip: SAINT PETERSBURG, FL 33714

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TC (X) Change () Addition
Name: AIKINS, CHARLES
Address: 3663 58TH AVENUE N #450
City-St-Zip: SAINT PETERSBURG, FL 33714

Title: VC (X) Change () Addition
Name: HAUGH, MARESSE
Address: 2010 46TH AVENUE NORTH
City-St-Zip: SAINT PETERSBURG, FL 33714

Title: S (X) Change () Addition
Name: LENSETH, PETE
Address: 6684 27TH STREET NORTH
City-St-Zip: SAINT PETERSBURG, FL 33702

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: AS () Change (X) Addition
Name: QUINLIVAN, JAMES
Address: 14798 55TH WAY NORTH
City-St-Zip: CLEARWATER, FL 33760

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CAROL HOLTON

T

01/08/2009

Electronic Signature of Signing Officer or Director

Date