


**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 06, 2006 8:00 am**  
**Secretary of State**

03-06-2006 90013 041 \*\*\*\*61.25

**DOCUMENT # 711793**  
 1. Entity Name  
 THE AZALEA BAPTIST CHURCH, INC.



Principal Place of Business  
 7900 22 AVENUE NORTH  
 ST PETERSBURG, FL 33710-3733

Mailing Address  
 7900 22 AVENUE NORTH  
 ST PETERSBURG, FL 33710-3733

2. Principal Place of Business  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

City & State

Zip Country Zip Country

40024584



03012006 Chg-NP CR2E037 (11/05)

4. FEI Number  
 59-0910341

Applied For  
 Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MARTIN, JERRY  
 9972 51ST AVENUE NORTH  
 ST. PETERSBURG, FL 33708

7. Name and Address of New Registered Agent

Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City FL Zip Code

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS		
TITLE	DC	<input type="checkbox"/> Delete
NAME	MARTIN, JERRY	
STREET ADDRESS	9972 51ST AVENUE NORTH	
CITY-ST-ZIP	ST PETERSBURG, FL 33708	
TITLE	DS	<input type="checkbox"/> Delete
NAME	DEBOE, KIRBY	
STREET ADDRESS	3680 81ST STREET NORTH	
CITY-ST-ZIP	ST. PETERSBURG, FL 33710	
TITLE	DT	<input type="checkbox"/> Delete
NAME	LIEBIG, UNA	
STREET ADDRESS	7400 SUN ISLAND DRIVE, #309	
CITY-ST-ZIP	SOUTH PASADENA, FL 33707	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 attachment with an address, with all other like empowered.

SIGNATURE: *Wm Jerry Martin Jr* Wm Jerry Martin Jr 3/1/2006 (727) 391-5640  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #