

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**May 05, 2004 8:00 am**  
**Secretary of State**

05-05-2004 90240 046 \*\*\*\*61.25

**DOCUMENT # 714748**

1. Entity Name

ALBRIGHT UNITED METHODIST CHURCH OF ST.  
PETERSBURG, FLORIDA, INC.



Principal Place of Business

2750 FIFTH AVENUE NORTH  
ST. PETERSBURG FL 33713

Mailing Address

2750 FIFTH AVENUE NORTH  
ST. PETERSBURG FL 33713

14022055



MOORE

CR2E037 (11/03)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-0760203

Applied For

Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

MILLSPAW, EVELYN  
2716 15 AVENUE NORTH  
ST. PETERSBURG FL 33713

7. Name and Address of New Registered Agent

Name Lusk, J. Warren

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

4700 21st St N

City

St. Petersburg

FL

Zip Code

33714

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

J. Warren Lusk

J. Warren Lusk

4-28-04

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2004**

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 PDS ☒ Delete  
NAME MILLSPAW, EVELYN  
STREET ADDRESS 2716 15TH AVENUE NORTH  
CITY-ST-ZIP ST. PETERSBURG FL

TITLE D ☐ Delete  
NAME BEEBE, AGNES  
STREET ADDRESS 7323 PARKSIDE VILLAS DR.  
CITY-ST-ZIP SAINT PETERSBURG FL 33709

TITLE D ☐ Delete  
NAME DRICK, ROBERT  
STREET ADDRESS 6231 30TH AVE. N.  
CITY-ST-ZIP ST. PETERSBURG FL

TITLE D ☐ Delete  
NAME WILLIAMS, PAULIE  
STREET ADDRESS 913 31ST TERR NE  
CITY-ST-ZIP ST PETERSBURG FL 33704

TITLE D ☐ Delete  
NAME SAMS, EMMA  
STREET ADDRESS 4117 QUEEN ST N  
CITY-ST-ZIP ST PETERSBURG FL 33714

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PDS ☒ Change ☒ Addition  
NAME Lusk, J. Warren  
STREET ADDRESS 4700 21st St N  
CITY-ST-ZIP St. Petersburg FL 33714

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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.

SIGNATURE:

J. Warren Lusk

J. Warren Lusk

4-28-04 (817) 327-8920

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #