FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 715783 (7)

1. Corporation Name

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

Principal Place of Business	Mailing Address
845-87TH AVE. NORTH ST. PETERSBURG FL 33702	845-87TH AVE. NORTH ST. PETERSBURG FL 33702

3. Date Incorporated or Qualified: 12/31/1968
3a. Date of Last Report: 02/09/1995

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / 29
Country — 25 / 30

4. FEI Number: 59-1555012 ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

WHITE, RONALD C.
5348 1ST AVE. N.
ST. PETERSBURG FL 33710

10. Name and Address of New Registered Agent

81 Name: James K. Hickman
82 Street Address (P.O. Box Number is Not Acceptable): 300 1st Avenue Suite 500
83
84 City: St Petersburg FL 85 Zip Code: 33701

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: James K Hickman — 2-8-96
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		DELETE			Change / Addition
TITLE	D	☐	11 TITLE	D	☐ ☐
NAME	PARKS, ROGER		12 NAME	DAVID HICKS	
STREET ADDRESS	1077 86TH AVENUE NORTH		13 STREET ADDRESS	1353 87th AVE N.	
CITY-ST-ZIP	ST. PETERSBURG FL		14 CITY-ST-ZIP	ST. PETERSBURG, FL 33702	
TITLE	SD	☐	21 TITLE	D LOUIS GYSELINCK	☐ ☒
NAME	MARTIN, ROBERT		22 NAME		
STREET ADDRESS	1400 GANDY BLVD., APT. 1211		23 STREET ADDRESS	2060 52nd AVE N.	
CITY-ST-ZIP	ST. PETERSBURG FL		24 CITY-ST-ZIP	ST PETERSBURG, FL 33714	
TITLE	PD	☐	31 TITLE	D	☐ ☒
NAME	REDMAN, JUDITH		32 NAME	CHRIS FAVIRE	
STREET ADDRESS	10652 3RD ST., N., APT. H		33 STREET ADDRESS	5415 VENETIAN BLVD NE	
CITY-ST-ZIP	ST. PETERSBURG FL		34 CITY-ST-ZIP	ST. PETERSBURG, FL 33703	
TITLE	D	☒	41 TITLE	D LEE WARNOCK, JR	☐ ☒
NAME	STEWART, WAYNE		42 NAME		
STREET ADDRESS	7115 COQUINA WAY, APT 10		43 STREET ADDRESS	172 74th AVE. N	
CITY-ST-ZIP	ST. PETERSBURG FL		44 CITY-ST-ZIP	ST. PETERSBURG, FL 33702	
TITLE	SD	☒	51 TITLE		☐ ☐
NAME	STODDARD, JEANNETTE		52 NAME		
STREET ADDRESS	3741 40TH AVE., N.		53 STREET ADDRESS		
CITY-ST-ZIP	ST. PETERSBURG FL		54 CITY-ST-ZIP		
TITLE	D	☐	61 TITLE		☐ ☐
NAME	PARKS, LINDA		62 NAME		
STREET ADDRESS	1077 36TH AVENUE NORTH		63 STREET ADDRESS		
CITY-ST-ZIP	ST. PETERSBURG FL		64 CITY-ST-ZIP		

CR2E037 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Judith A Redman JUDITH A. REDMAN 2/9/96 813-576-3919
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #