

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

FILED
Apr 30, 2004 8:00 am
Secretary of State

04-30-2004 90287 001 ****61.25

DOCUMENT # 715783

1. Entity Name

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



Principal Place of Business

**845-87TH AVE. NORTH
ST. PETERSBURG FL 33702**

Mailing Address

**845-87TH AVE. NORTH
ST. PETERSBURG FL 33702**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1555012

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**RICHMOND, RICHARD
3651 N 106TH AVE
CLEARWATER FL 33762**

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

Richard Richmond

Richard Richmond

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
NAME **TD**
STREET ADDRESS **RICHMOND, RICHARD**
CITY-ST-ZIP **3651 N 106TH AVE
CLEARWATER FL 33762**

TITLE ☐ Change ☒ Addition
NAME **TR**
STREET ADDRESS **Roger Parks**
CITY-ST-ZIP **1097 86th. Ave N
St. Petersburg, FL 33702**

TITLE ☐ Delete
NAME **TD**
STREET ADDRESS **WARREN, FERRY JERRY**
CITY-ST-ZIP **322 NE 80TH AVE
SAINT PETERSBURG FL 33702**

TITLE ☐ Change ☒ Addition
NAME **TR**
STREET ADDRESS **STEVE CARO**
CITY-ST-ZIP **5233 Springwood Blvd.
Pinellas Park, FL 33782**

TITLE ☐ Delete
NAME **TR**
STREET ADDRESS **PARKS, LINDA**
CITY-ST-ZIP **3650 LAKE BV
CLEARWATER FL**

TITLE ☐ Change ☒ Addition
NAME **TR**
STREET ADDRESS **VAL GIRARD**
CITY-ST-ZIP **1279 86th. Ave. N.
St. Petersburg, FL 33702**

TITLE ☐ Delete
NAME **TR**
STREET ADDRESS **COHEN, NANCY**
CITY-ST-ZIP **7300 N 14TH ST
SAINT PETERSBURG FL 33702**

TITLE ☐ Change ☒ Addition
NAME **TR**
STREET ADDRESS **Linda Gyselinck**
CITY-ST-ZIP **2060 52nd. Ave. N.
St. Petersburg FL 33714**

TITLE ☒ Delete
NAME **TR**
STREET ADDRESS **EDDINGS, JESSE**
CITY-ST-ZIP **2915 12 ST N
SAINT PETERSBURG FL 33704**

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

TITLE ☐ Delete
NAME **TR**
STREET ADDRESS **GYSLINCK, LOU**
CITY-ST-ZIP **2060 52 AV N
SAINT PETERSBURG FL 33714**

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:

Richard Richmond

Richard Richmond

Chairman 4-28-04

727-

576-3919

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #