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Mar 24 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **716865** (1)

1. Corporation Name

ST. PAUL'S CHURCH, INC.

Principal Place of Business

Mailing Address

122 TRINITY CIRCLE
P.O. BOX 21946, REV HENRY DAVIDSON
TAMPA FL 33622-1946
USP O BOX 21946
P.O. BOX 21946, REV HENRY DAVIDSON
TAMPA FL 33622-1946
US

2. Principal Place of Business

2a. Mailing Address

21 SAME as above

26 SAME as above

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

07/14/1969

4. FEI Number

59-2413220

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be

Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐

Yes

☐

No

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30.☐

Yes

☐

No

BALLENGER, JACK
122 TRINITY CIRCLE
P. O. BOX 21946
TAMPA FL 33622

10. Name and Address of New Registered Agent

81 Name

SAME

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

83

84 City

FL

85 Zip Code

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 Jack Ballenger, Director

March 18, 1998

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	PD	<input type="checkbox"/> DELETE
NAME	DAVIDSON, HENRY (REV.)	
STREET ADDRESS	108 AMALFIE ROAD	
CITY-ST-ZIP	NOKOMIS FL	

TITLE	VD	<input type="checkbox"/> DELETE
NAME	BALLENGER, JACK	
STREET ADDRESS	122 TRINITY CIRCLE, P. O. BOX 21946	
CITY-ST-ZIP	TAMPA FL	

TITLE	VD	<input type="checkbox"/> DELETE
NAME	GRAHAM, HARRIETTE	
STREET ADDRESS	108 AMALFIE ROAD	
CITY-ST-ZIP	NOKOMIS FL	

TITLE	VPD	<input type="checkbox"/> DELETE
NAME	OSBORN, JOHN R.	
STREET ADDRESS	108 AMALFIE ROAD	
CITY-ST-ZIP	NOKOMIS FL	

TITLE	STD	<input type="checkbox"/> DELETE
NAME	EAVES, DORIS	
STREET ADDRESS	108 AMALFIE Address change ONLY	
CITY-ST-ZIP	NOKOMIS FL	

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	

2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	

3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	

4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	

5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	

6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 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 my address.

SIGNATURE: Rev. Henry Davidson

March 18, 1998

813-237-9281

CR2E037 (10/97)