

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 18, 2003 8:00 am
Secretary of State

03-18-2003 90069 012 ****61.25

DOCUMENT # 722052

1. Entity Name

**GATEWAY BAPTIST CHURCH OF ST. PETERSBURG, FLORIDA
A, INC.**



Principal Place of Business

**ST PETERSBURG FLORIDA INC
7700 16TH ST N
ST PETERSBURG FL 33702**

Mailing Address

**ST PETERSBURG FLORIDA INC
7700 16TH ST N
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 **59-1370061**

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

**GIBBS, ERNEST JR
3724 GREENFORD ST.
VALRICO FL 33594**

Name **Billy Little**

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

6616 Kent Dr. N

City **St. Pete**

FL

Zip Code **33700**

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 *Rev. Billy Little*

(NOTE: Registered Agent signature required when reinstating)

DATE

3-11-03

FILE NOW: FEE IS \$61.25

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	T	<input type="checkbox"/> Delete
NAME	APPLETON, MARTHA	
STREET ADDRESS	6320 13TH ST. NORTH	
CITY-ST-ZIP	SAINT PETERSBURG FL 33702	
TITLE	D	<input type="checkbox"/> Delete
NAME	WILEY, CHARLES	
STREET ADDRESS	6311. 16TH STREET-N	
CITY-ST-ZIP	ST PETERSBURG FL	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	NEENER, ANN	
STREET ADDRESS	6625 23 CIRCLE N.	
CITY-ST-ZIP	ST. PETERSBURG FL 33702	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	GIBBS, ERNIE	
STREET ADDRESS	3724 GREENFORD ST	
CITY-ST-ZIP	VALRICO FL 33594	
TITLE	D	<input type="checkbox"/> Delete
NAME	DECK, PAUL	
STREET ADDRESS	6523 22ND STREET N.	
CITY-ST-ZIP	ST. PETERSBURG FL 33702	
TITLE		<input type="checkbox"/> Delete
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	S	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PAM Little	
STREET ADDRESS	6616 Kent Drive North	
CITY-ST-ZIP	St. Pete, FL. 33702	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Billy Little	
STREET ADDRESS	6616 Kent Dr. North	
CITY-ST-ZIP	St. Pete, FL. 33702	
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 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:

Rev. Billy Little

3/11/03 (727)-577-0407

CR2E037 (10/02)