FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 722708

1. Corporation Name

ST. PETERSBURG CHURCH OF RELIGIOUS SCIENCE, INC. OF ST. PETERSBURG, FLORIDA

Principal Place of Business

Mailing Address

2a. Mailing Address

26

5200 - 29TH AVENUE NORTH ST PETERSBURG FL 33710

2. Principal Place of Business

5200 - 29TH AVENUE NORTH ST PETERSBURG FL 33710

FILED Apr 29, 1999 8:00 am § Secretary of State

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3. Date Incorporated or Qualifed

02/17/1972

Suite, Apt.	#, etc.	Suite, Apt. #, etc.			4. FEI Number	Ap	plied For	
22	27		:		94-2835301	No	t Applicable	
City & State City & State					5 0 1/2 1 (0) 1 5	\$8.75	Additional	
3 28					5. Certificate of Status Desired	Fee Re	quired	
Zip			Country		6. Election Campaign Financing	\$5.00 May Be		
24	25 29 30				Trust Fund Contribution	Added t	, ,	
	9. Name and Address of Current	 	<u> </u>		10. Name and Address of New Registere	d Agent		
			81	Name				
BINIOTON IOAN O				20 C A A LL A A C A C A C A C A C A C A C				
PINKSTON, JOAN C.				82 Street Address (P.O. Box Number is Not Acceptable)				
5200 - 29TH AVENUE NORTH								
ST PETERSBURG FL 33710								
			84	City		85 Zip (Code	
)) 		and in a sharife this statement for the purpose	of changing its	registered	
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 a	m familiar with, and accept the obligation	ns of, Section 617.0503, Florida	Statutes.	•	• •		ļ	
SIGNATURE								
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)								
12.	OFFICERS AND		13,		ADDITIONS/CHANGES TO OFFICERS A		Addition	
TITLE	☐ DELETE		1.1 TITLE			Change	L' Addition	
NAME	EDWARDS, LAURIE							
STREET ADDRESS	545 29TH AVE N.			ADDRESS				
CITY-ST-ZIP	ST PETERSBURG FL 33704		1.4 CITY-ST	T-ZIP				
TITLE	S DELETE		2.1 TITLE	9	S ·	i hange	XX Addition	
NAME	HIPPS, TERRY		2.2 NAME		SMITH DALE		1	
STREET ADDRESS	the same of the same and the same as a same as				71523SANDY LANE			
C/TY-ST-ZIP	ST. PETERSBURG FL		2, 4 CITY-S	T-ZIP	WESLEY CHAPEL FL 33544			
TITLE	TR	- · · · · · · · DELETE	3.1 TIFLE	V	P	Change	☐ Addition	
NAME			3.2 NAME	M.	ARKS, PEGGIE			
STREET ADDRESS	MOGEL, METALL		3.3 STREET	ADDRESS 4/	628 CYPRESS WAY SOUTH			
					T PETERSBURG, FL 337 <u>05</u>			
CITY-ST-ZIP	Γ¥I DCI ETC		4.1 TITLE	T1		Change	Addition	
	yr		4.2 NAME	1	OBERTS, NORMA			
NAME	FRANCIS, BARBARA		4.3 STREET		005 - 12TH AVENUE SOUTH			
STREET ADDRESS	·=·			٠ ا م-	T PETERSBURG, FL 33712			
C/TY-ST-ZIP	LARGO FL 33774		4.4 CITY-ST	T-ZIP 3 T		[T] Change	XX Addition	
TITLE .	TR	<u> </u>			EARS, CLAIRE	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~		
NAME	MARKS, PEGGIE		5.2 NAME 5.3 STREET		198 TERRACE GARDEN DRNN #	101		
STREET ADDRESS	4020-CIFRESS TREES.		5.3 STREET	10-	T PETERSBURG, FLA 33709			
CITY-ST-ZIP	ST PETERSBURG FL 33705			1.211		(1) (Chango	XX Addition	
TITLE	TR	XX DELETE 6			K OOD, CECILE	Change	7123 Madigali	
NAME	Bolinger, Teri		6.2 NAME					
STREET ADDRESS	8206 60TH ST CIRCLE E #1201		6.3 STREET	1	08 - 12TH AVENUE N			
CITY-ST-ZIP	SARASOTA FL		6.4 CITY-S		T PETERSBURG, FL 333701			
14. I hereby o	ertify that the information supplied with	this filing does not qualify for the	e exempti	on stated in S	Section 119.07(3)(i), Florida Statutes. I further o	ertify that the i	ntormation	

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 all 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, with all other like empowered.

SIGNATUAURIE EDWARDS! WIREASURER

4/26/99 727 323-5278

Daytime Phone #