


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

7/25/2007-90045-043-\$61.25-\$61.25

DOCUMENT # 740953
 1. Entity Name
MT. CALVARY MISSIONARY BAPTIST CHURCH, INCORPORATED, OF ST. PETERBURG, FLORIDA



FILED
 07 SEP 21 PM 2: 37
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address
 2321 HARTFORD ST.,S 2321 HARTFORD ST.,S.
 ST. PETERSBURG, FL 33711 ST. PETERSBURG, FL 33711



07132007 No Chg-NP CR2E037 (4/06)

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4. FEI Number Applied For
 59-1849928 Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 NORTHERN, CYLINTHIA
 4675 19TH AVE S
 ST. PETERSBURG, FL 33111

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8. The above named entity submits this statement for the purpose of changing its registered officer, registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.
 SIGNATURE: *[Signature]* DATE: 8/31/07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by September 14, 2007

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	CC
NAME	MITCHELL, GERTRICE
STREET ADDRESS	4651 20 AVE S
CITY - ST - ZIP	SAINT PETERSBURG, FL 33711
TITLE	T
NAME	SMITH, EARNESTINE
STREET ADDRESS	300 38 ST S
CITY - ST - ZIP	SAINT PETERSBURG, FL 33711
TITLE	FS
NAME	NORTHERN, CYLINTHIA
STREET ADDRESS	4675-19 AVE S
CITY - ST - ZIP	SAINT PETERSBURG, FL 33711
TITLE	D
NAME	SMITHQ, LEE
STREET ADDRESS	300 387 ST S
CITY - ST - ZIP	SAINT PETERSBURG, FL 33711
TITLE	CT
NAME	HARVEY, BEATRIZ C
STREET ADDRESS	4100 - 24 AVE S
CITY - ST - ZIP	SAINT PETERSBURG, FL 33711
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

8/9/25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 817, 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: *[Signature]* Date: 8/31/07 Telephone #: 727-321-8065
Signature and typed or printed name of signing officer or director