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FILED

May 16 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 742897 (2)

1. Corporation Name

20TH ST. CHURCH OF CHRIST, INC.

Principal Place of Business

820 20TH STREET SOUTH
ST. PETERSBURG FL 33712-2349

Mailing Address

820 20TH STREET SOUTH
ST. PETERSBURG FL 33712-2349



3. Date Incorporated or Qualified
05/17/1978

3a. Date of Last Report
09/16/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

4. FEI Number

59-2375028

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BROWN, CARL M JR.
4024 21ST AVENUE SOUTH
ST. PETERSBURG FL 33711

81 Name

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

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
NAME WASHINGTON, WILLIE
STREET ADDRESS 2670 FAIRWAY AVENUE SOUTH
CITY - ST - ZIP ST. PETERSBURG FL

DELETE

TITLE VD
NAME TIMMONS, ROBERT
STREET ADDRESS 3001 PONCE DE LEON WAY SOUTH
CITY - ST - ZIP ST. PETERSBURG FL

DELETE

TITLE TSD
NAME BROWN, CARL M. JR.
STREET ADDRESS 4024 21ST STREET SOUTH
CITY - ST - ZIP ST PETERSBURG FL

DELETE

TITLE D
NAME ODOM, PHIL
STREET ADDRESS 2435 31ST STREET SOUTH
CITY - ST - ZIP ST. PETERSBURG FL

DELETE

TITLE D
NAME CLEMONS, ROBERT L SR
STREET ADDRESS 557 22ND AVE SE
CITY - ST - ZIP ST PETERSBURG FL

DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

Change Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

Change Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

Change Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

Change Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

Change Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

Change Addition

14. I do 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 an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0050865

CR2E037 (9/96)