2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 25, 2009
Secretary of State

DOCUMENT# 747556

Entity Name: 10TH STREET CHURCH OF GOD, INC.

Current Principal Place of Business:

207 -10TH STREET NORTH
ST PETERSBURG, FL 33705

New Principal Place of Business:

Current Mailing Address:

207 -10TH STREET NORTH
ST PETERSBURG, FL 33705

New Mailing Address:

FEI Number: 59-2075326 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BELL, RONALD
9753 - 51ST AVENUE NORTH
SAINT PETERSBURG, FL 33708 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: TD ( ) Delete
Name: BROWN, CARRIE,
Address: 2508 12TH AVE SO
City-St-Zip: ST. PETE, FL

Title: VD ( ) Delete
Name: CONNELLY, ULYSSES
Address: 1848 LAKEWOOD DRIVE SOUTH
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: PD ( ) Delete
Name: BELL, RONALD PASTOR
Address: 9753 - 51ST AVENUE NORTH
City-St-Zip: SAINT PETERSBURG, FL 33708

Title: SD ( ) Delete
Name: SMITH, JOSEPHINE
Address: 2701 63RD AVENUE SOUTH
City-St-Zip: SAINT PETERSBURG, FL 33712

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEPHINE E. SMITH MS. 03/25/2009

Electronic Signature of Signing Officer or Director — Date