FILED Jul 19, 2006 8:00 am Secretary of State

2006	NOT-FOR-PROFIT CORPORATION	N
	ANNUAL REPORT	

					out out	•		
DOCUMENT # 757917 1. Entity Name FIRST CHURCH OF GOD OF ST. PETERSBURG, FLORIDA, INC.					07-19-2006 9		***61.2	25
2813 30TH AVE. NORTH 2		Mailing Address 2813 30TH AVE. NORTH ST. PETERSBURG, FL 33713			4010000	•		
				(386)((1888)			1 67 6 7 6 7 67 67	JEL 61 (88)
2. Principal Place of Business		3. Mailing Address			100 (100 (100 (100 (100 (100 (100 (100			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		07102006	Chg-NP	CR2E037 (4	4/06)	
City & State		City & State		4. FEI Numbe 59-1154			——	olied For Applicable
Žip	Country	Zip	Country	5. Certificate	of Status Desired		75 Addi Required	
	6. Name and Address of Current	Registered Agent		7. Name and	Address of New R	egistered Agent	t	
CMITH TH	OMAS		Name					}
SMITH, THOMAS 2813 30TH AVE. NO. ST PETERSBURG, FL 33713			Street Ad	dress (P.O. Box Numbe	er is Not Acceptable	e)		
			City			FL Z	Zip Code	,
the obligation	named entity submits this statement for ions of registered agent. Signature, typed or printed name of registered agent.		<u> </u>		h, in the State of Flo		iar with, a	and accept
Filing Fee is \$61.25 9. Election Campaign Financing				e required when reinstating)		DATE		
· .		9. Election Cam	paign Financing	\$5.00 May B		lake check pay		
	e by September 6, 2006	9. Election Cam Trust Fund Co	paign Financing ontribution. [\$5.00 May B Added to Fees	Flor	lake check pay ida Departmer	nt of St	ate
10.		9. Election Cam Trust Fund Co	paign Financing	\$5.00 May B Added to Fees		lake check pay ida Departmer	nt of St	ate
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I nereby certify that the information supplied with this filing does not quality 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 or 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 a powered.

SIGNATURE: THOMAS SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

THOMAS **SMITH**

7-16-06 (727-526-5565) Daytime Phone #