## 2004 NOT-FOR-PROFIT-CORPORATION ANNUAL REPORT (AR)

## **Secretary of State** DOCUMENT # N00000007200 03-09-2004 90035 029 \*\*\*\*61.25 1. Entity Name INTERDENOMINATIONAL MINISTERIAL ALLIANCE OF ST. PETERSBURG, INC. Principal Place of Business Mailing Address 66408075 2900 1ST AVE SO 2900 1ST AVE SO SAINT PETERSBURG FL 33712 SAINT PETERSBURG FL 33712 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E037 (11/03) City & State City & State 4. FEI Number Applied For 57-1138270 Not Applicable Zip Zio Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GUSHAVE RAINEY, MARTIN-Street Address (P.O. Box Number is Not Accoptable 3901 39TH ST S ST PETERSBURG FL 33711 Zip Code 33705 CHERSBURG 8. 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. I am familiar with, and accept the obligations of registered agent SIGNATURE FILE NOW: FEE IS \$61.25 Make Check Payable to 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Due By May 1, 2004 Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE Change ☐ Addition ☐ Detete VICTOR, GUSTAVE NAME NAME 2500 9TH ST S #D STREET ADDRESS STREET ADDRESS ST. PETERSBURG FL 33705 CUTY - ST-78P CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition GRAHAM, DEE 2900 1ST AVE SO STREET ADDRESS STREET ADDRESS SAINT PETERSBURG FL 33712 CITY-ST-ZIP CITY:ST-ZIP Change TITLE Delete TITEE ☐ Addition FRANCIS, ROGER NAME 1200 37TH AVE.NE. ... STREET ADDRESS STREET AUDRESS ST. PETERSBURG FL 33704 CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Addition (Delete RAINEY, MARTIN NAME NAME 3901 39TH ST S STREET ADDRESS STREET ADDRESS ST. PETERSBURG FL 33711 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition LEONARD, PRESTON D. H. NAME 2230 21ST AVE S STREET ADDRESS STREET ADORESS ST. PETERSBURG FL 33712 CITY-ST-ZIP CITY-ST-ZIP TITLE Defete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I 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 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 617. 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:

**FILED** 

Mar 29, 2004 8:00 am

Daylyne Phone i