2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED Aug 18, 2006 08:00 Al Secretary of State DOCUMENT # N00000007200 1. Entity Name INTERDENOMINATIONAL MINISTERIAL ALLIANCE OF ST. PETERSBURG, INC. Principal Place of Business Mailing Address 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. 2nd MOORE CR2E037 (4/06) City & State 4. FEI Number Applied For City & State 57-1138270 Not Applicable \$8.75 Additional Zin Country Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name JONES, HARRY DR. Street Address (P.O. Box Number is Not Acceptable) 3907 LASALLE STREET TAMPA FL 33607 City Zip Code 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 Signature, typod or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstalling) DATE FILE NOW: FEE IS \$61.25 Make Check Payable to \$5.00 May Be 9. Election Campaign Financing Due By September 6, 2006 Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 MLE ☐ Detete ππιε ☐ Change ☐ Addition JONES, HARRY DR. NAME NAME 3907 LASALLE STREET STREET ADDRESS STREET ADDRESS 08/18/06-80004-002 61.25 **TAMPA FL 33607** CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change Addition LONG, CURTISS REV. NAME 1601 22ND AVENUE SOUTH STREET ADDRESS STREET ADDRESS SAINT PETERSBURG FL 33712 CITY-ST-7IP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition GRAHAM, DEE REV. 2900 1ST AVE SO STREET ADDRESS STREET ADDRESS SAINT PETERSBURG FL 33712 CITY-ST-ZIP CITY-ST-ZIP TR ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME LEONARD, PRESTON D.H. NAME 2230 21 AVENUE S. STREET ADDRESS STREET ADDRESS ST. PETERSBURG FL 33712 CITY-S1-ZIP CITY-ST-ZIP TITLE Delete ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ■ Addition BILLE TIJLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

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 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: has New Graham

727-522-3907