

4-12-95 8-3417 XG
FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 APR 12 PM 12: 21

DOCUMENT # N01071 (2)

1. Corporation Name

PASADENA COMMUNITY CHURCH, INC.

Principal Place of Business

**112 70TH STREET SOUTH
ST. PETERSBURG FL 33707**

Mailing Address

**112 70TH STREET SOUTH
ST. PETERSBURG FL 33707**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/24/1984

3a. Date of Last Report

02/24/1994

4. FEI Number

59-0624434

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☒

**\$68.75 Supplemental
Fee Not Required**

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

**HITCHENS, PAUL W ESQUIRE
6464 FIRST AVENUE, NORTH
ST PETERSBURG FL 33710**

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

MARCH 22, 1995

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME GALLAN, J. PATRICK
STREET ADDRESS 112 70TH ST SOUTH
CITY - ST - ZIP ST. PETERSBURG FL

1.1 TITLE PD
1.2 NAME Anderson, William
1.3 STREET ADDRESS 112 - 70th St. So.
1.4 CITY - ST - ZIP St. Petersburg FL 33707
☒ Change ☐ Addition

TITLE SD
NAME WOOLLEY, ALEXANDRA
STREET ADDRESS 112 70TH STREET SOUTH
CITY - ST - ZIP ST. PETERSBURG FL

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

TITLE TD
NAME YINGST, PAUL
STREET ADDRESS 112 70TH STREET SOUTH
CITY - ST - ZIP ST. PETERSBURG FL

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

TITLE CD
NAME HOBBS, JAMES JR.
STREET ADDRESS 112 70TH STREET SOUTH
CITY - ST - ZIP ST. PETERSBURG FL

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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 #

Paul V. Yingst Paul V. Yingst

4/4/95 813-381-2499