2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0200000013

FILED Apr 11, 2006 Secretary of State

Entity Name: ST. PETERSBURG PRESBYTERIAN CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business:

600 1ST AVE. N. SUITE 125

ST. PETERSBURG, FL 33701

Current Mailing Address: New Mailing Address:

600 1ST AVE. N. SUITE 125

ST. PETERSBURG, FL 33701

FEI Number: 59-3717330 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

AMLEY, EDWARD A DDS

5753 1ST AVE N

600 1ST AVE. N.

ST PETERSBURG, FL 33710 US SUITE 125 ST PETERSBURG, FL 33701 US

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: DAVID L. HARDING 04/11/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHAN

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CPD () Delete Title: CPD (X) Change () Addition

Name: AMLEY, EDWARD A Name: HARDING, DAVID L

 Address:
 5153 1ST AVE N
 Address:
 600 1ST AVE. N., SUITE 125

 City-St-Zip:
 SAINT PETERSBURG, FL 33710
 City-St-Zip:
 SAINT PETERSBURG, FL 33701

Title: VSD (X) Delete Title: () Change () Addition

 Name:
 SCOTT, CARLEY J
 Name:

 Address:
 1600 72 AVE NE
 Address:

 City-St-Zip:
 SAINT PETERSBURG, FL 33702
 City-St-Zip:

Title: VTD (X) Delete Title: () Change () Addition

 Name:
 ELLINGER, EMERY
 Name:

 Address:
 1600 BEACH DRIVE
 Address:

 City-St-Zip:
 SAINT PETERSBURG, FL 33704
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVID L. HARDING CPD 04/11/2006

Electronic Signature of Signing Officer or Director

Date