

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001056

FILED  
Apr 28, 2005  
Secretary of State

**Entity Name:** UNDER CONSTRUCTION YOUTH MINISTRIES INC.

**Current Principal Place of Business:**

10543 51ST. TERRACE NORTH  
ST. PETERSBURG, FL 33708 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 3054  
SEMINOLE, FL 33775 US

**New Mailing Address:**

**FEI Number:** 82-0585653

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CUMMINGS, CRAIG E  
10543 51ST. TERRACE NORTH  
ST. PETERSBURG, FL 33708 US

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

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:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: T ( ) Delete  
Name: CARLTON, JAMES M  
Address: 132 S.E. JEFFERSON CIRCLE N.  
City-St-Zip: ST. PETERSBURG, FL 33703 US

Title: D ( ) Delete  
Name: CLEVELLE, ERIC R  
Address: 765 85TH. AVENUE N.  
City-St-Zip: ST. PETERSBURG, FL 33702 US

Title: S ( ) Delete  
Name: CUMMINGS, BEVERLY J  
Address: 10543 51ST. TERRACE N.  
City-St-Zip: ST. PETERSBURG, FL 33708 US

Title: C ( ) Delete  
Name: CUMMINGS, CRAIG E  
Address: 10543 51ST. TERRACE N.  
City-St-Zip: ST. PETERSBURG, FL 33708 US

Title: D ( ) Delete  
Name: EMIGH, MICHAEL  
Address: 1286 HERMITAGE  
City-St-Zip: CLEARWATER, FL 33764 US

Title: D ( ) Delete  
Name: PIERCE, PAUL  
Address: 8224 128TH. STREET  
City-St-Zip: SEMINOLE, FL 33776 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CRAIG CUMMINGS

PRES

04/28/2005

Electronic Signature of Signing Officer or Director

Date