## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N27075

FILED Apr 15, 2009 Secretary of State

Entity Name: GETHSEMANE MISSIONARY BAPTIST CHURCH OF ST. PETERSBURG, INC.

**Current Principal Place of Business: New Principal Place of Business:** 2580 12TH AVENUE SOUTH 2580 12TH AVENUE SOUTH C/O WILLIE FEASTER C/O DEACON THADDEUS MITCHELL ST. PETERSBURG, FL 33712 ST. PETERSBURG, FL 33712 **Current Mailing Address: New Mailing Address:** 2580 12TH AVENUE SOUTH C/O THADDEUS MITCHELL ST. PETERSBURG, FL 33712 FEI Number: 59-3033901 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MITCHELL, THADDEUS T 4500 CARDINAL WAY SOUTH US ST. PETERSBURG, FL 33712 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition MITCHELL, THADDEUS T Name: Name: 4500 CARDINAL WAY S Address: Address: City-St-Zip: ST. PETERSBURG, FL City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition HARRIS, ROBERT Name: HARRIS, ROBERT Name: Address: 1443 9TH STREET SOUTH Address: 1443 - 9TH STREET SOUTH City-St-Zip: ST. PETERSBURG, FL City-St-Zip: ST. PETERSBURG, FL Title: ( ) Delete Title: (X) Change ( ) Addition ROBINSON, GREGORY ROBINSON, GREGORY Name: Name: 5661 17TH WY S, APT A 5661 - 17TH WAY SO, APT A Address: Address: City-St-Zip: SAINT PETERSBURG, FL 33712 City-St-Zip: SAINT PETERSBURG, FL 33712 Title: FS ( ) Delete Title: (X) Change ( ) Addition Name: WILSON, HAROLD Name: LACY, FRANKIE 2525 49TH STREET SOUTH 3312 QUEENSBORO AVENUE SOUTH Address: Address: City-St-Zip: GULFPORT, FL 33711 City-St-Zip: ST. PETERSBURG, FL 33712 Title: () Delete Title: (X) Change ( ) Addition REED, BERNARD REED, BERNARD Name: Name: 720-43RD AVE, N 2427 - 10TH AVENUE SOUTH Address: Address: SAINT PETERSBURG, FL 33703 City-St-Zip: City-St-Zip: SAINT PETERSBURG, FL 33712 Title: () Delete Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify 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.

Name:

Address:

City-St-Zip:

SIGNATURE: SHARON A. MITCHELL PS 04/15/2009

MITCHELL, SHARON A

4127 5TH AVENUE SOUTH

SAINT PETERSBURG, FL 33711

Name:

Address:

City-St-Zip: