2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

FILED
Mar 30, 2007 08:00 AM
Secretary of State

DOCUMENT # N28063

1. Entity Name

ST. PETERSBURG COMMUNITY CHURCH INCORPORATED



Principal Place of Business

Mailing Address

4501 30TH AVE., NORTH ST. PETERSBURG, FL 33713-2109 US 4501 30TH AVE., NORTH ST. PETERSBURG, FL 33713-2109 US



03212007 No Chg-NP

CR2E037 (4/06)

4. FEI Number 59-2954663

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HILDRETH, RANDALL 4501 30TH NORTH ST. PETERSBURG, FL 33713-2109

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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.				equired when reinstating)	DATE
	Filing Fee is \$61.25 Due by May 1, 2007	Election Campaign Financ Trust Fund Contribution.	sing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIRECTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC HILDRETH, RANDALL 4501 30TH NORTH ST. PETERSBURG, FL 337132109				U00000684339 04/06/07-80029-008 61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KRUMM, ROBERT 4501 30TH NORTH ST. PETERSBURG, FL 337132109				04/06/07-80029-008 61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS SOMMERKAMP, ESTELA 4501 30TH NORTH ST PETERSBURG, FL 337132109			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. Thereby 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 path; that I am an officer or director					

14. 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/28/2007

727-525-0012