## 2002 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with a

SIGNATURE:

## Mar 14, 2002 8:00 am **DOCUMENT # N30692 Secretary of State** 1. Entity Name 03-14-2002 90039 010 \*\*\*\*61.25 NEW MOUNT OLIVE PRIMITIVE BAPTIST CHURCH OF ST. PETERSBURG, FLORIDA, INC. Principal Place of Business Mailing Address 3001 18TH AVENUE SOUTH 3001 18TH AVENUE SOUTH ST, PETERSBURG FL 33712 ST. PETERSBURG FL 33712 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-2930117 Not Applicable \$8.75 Additional Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent **HUNT. LEAMON** 3151 17TH AVENUE SOUTH ST. PETERSBURG FL 33712 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. \* 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 **Department of State** Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. OFFICERS AND DIRECTORS 10. (9/01) ☐ Change Addition TITLE ☐ Delete NAME RHODES, CARL II **CR2E037** STREET ADDRESS STREET ADDRESS 2456 MELROSE AVENUE SO. CITY-ST-ZIP CITY-ST-ZIP ST. PETERSBURG FL ☐ Change ☐ Addition TITLE ☐ Delete WILLIAMS, JANIE NAME STREET ADDRESS STREET ADDRESS 620 38TH STREET SO. CITY-ST-ZIP CITY-ST-ZIP ST. PETERSBURG FL Addition ☐ Delete ☐ Change TITLE MORGAN, JULIA NAME STREET ADDRESS 1930 BARCELONA WAY S. STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ST. PETERSBURG FL ☐ Change ☐ Addition Delete TITLE TITLE CRAWFORD, WILLIE NAME NAME STREET ADDRESS STREET ADDRESS 4001 22ND AVE S CITY-ST-ZIP CITY-ST-ZIP SAINT PETERSBURG FL 33711 Change ☐ Addition ☐ Delete TITLE TITLE DOWNIE, WILHELMINA NAME NAME STREET ADDRESS STREET ADDRESS 2155 22ND AVENUE SOUTH CITY-ST-ZIP CITY-ST-ZIP ST. PETERSBURG FL ☐ Addition Change TITLE ☐ Delete TITLE NAME MORGAN, JAMES NAME STREET ADDRESS STREET ADDRESS 2342 7TH AVE S CITY-ST-7IP ST. PETERSBURG FL 12. I hereby certify that the information supplied with this filling does not qualify 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 signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or truegee empowered execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if